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The newsweekly for pharmacy

a Benn publication

November 7 1981

Macarthys try o speed up Inichem profit hare verdict n the courts

Council urged o 'compromise' n new-style ertificate

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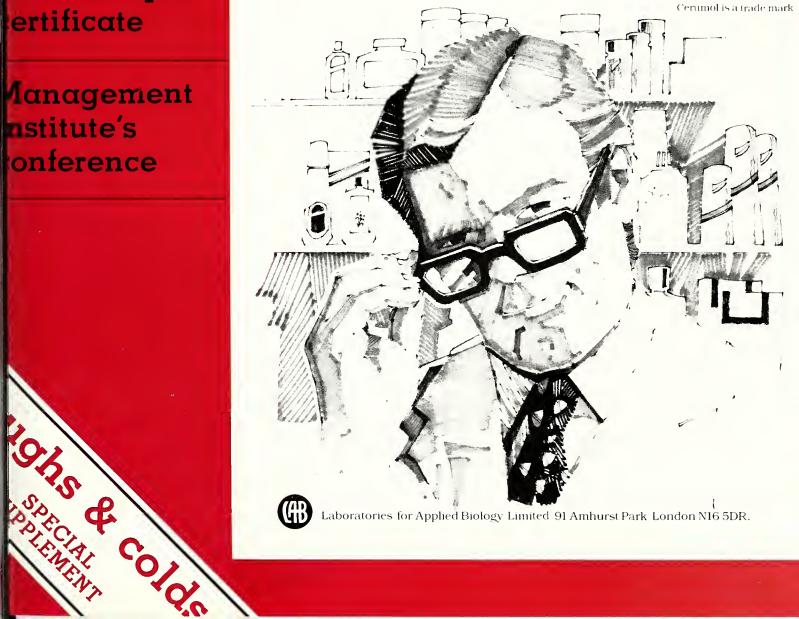
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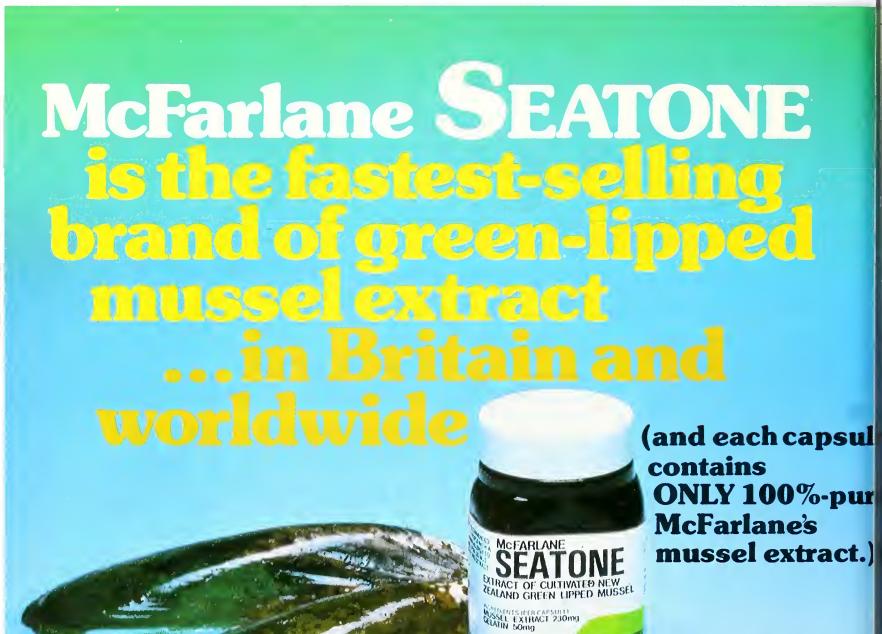
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# CHEMIST DRUGGIST

**Incorporating Retail Chemist** 

November 7 1981

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#### Certified

Will the Society's Council heed the voice of its members? A great depth of feeling must be involved for members to resort to calling a special general meeting (p856) — the last one was back in 1969. A perhaps surprising number of people attended (nearly 200), and although the majority were younger members, a substantial number of older pharmacists were also present, showing that criticism of the new certificate is not confined to those recently qualified.

A cynic might say that this was a popularist bandwagon, with the outcome in little doubt. However the attendance certainly exceeded the expectations of those proposing the motion. It might have been even higher if the Society's president had made his decision sooner to allow students and pre-registration graduates to attend as observers. As he so rightly said, they "have an interest in the subject," and although they could not vote it was a just decision to allow them to attend. It is

a pity that notice could not have been given earlier — and published.

Although the attitude of the meeting was at times flippant, and the speakers listened to with wry amusement, Council would be wrong to try to treat the matter as a "storm in a tea cup." A lighthearted approach to a serious matter should not be mistaken for a lack of purpose. It was evident that this was a point on which many pharmacists have a strong opinion, and even if it may be considered a minor issue by some, it is the democratic principle which is under the spotlight.

For Council to ignore this groundswell of opinion would be to increase the "us and them" divide, and give credence to the oft-voiced thought that the membership has little control over the affairs of their Society. To follow the process through, Council is bound to take positive action in the direction indicated at the meeting — or provide cogent reasons to the membership why not. The motion passed has no binding effect but Council has a moral responsibility as a democratically-elected body to follow a democratic procedure in a just and fair manner.

#### Courting disaster?

Can Unichem members' profit share be equated with other wholesalers' discounts - and if so, can it be clawed back from chemists' NHS remuneration by the Department of Health? The answers to these questions and many others will be answered (as "Soap" aficianados might say) next year in the courts (p857). And "soap opera" is hardly far from the truth in the wholesaler scene at the moment though the viewers find themselves involved in the various plots more personally than they would wish. At the end of each episode the retail pharmacist is left hanging over a new precipice, or is persuaded that the Promised Land will be his immediately after next week's title sequence. Unichem entice; Macarthys warn — and the courts will adjudicate.

There can be no doubt that Unichem are expertly squeezing every ounce of

commercial advantage out of the undecided legal point — even to quantifying the savings members will make if there is a successful outcome. Macarthys, on the other hand, are apparently trying to put a time limit on this exercise — they hope to get a decision in six months against Unichem's forecast of a year. Certainly it will not be in the interest of the contractor if a ruling is long-delayed, neither from the point of view of financial planning nor the potential shift of wholesaler business for the wrong — and probably temporary — reasons.

When Unichem made their decision to go to law (C&D, October 10) we took the view that the wholesaler concentration that might result could be in no-one's interest — especially that of the NHS patient. Our opinion has not changed, and the sooner the curtain is brought down on this performance the better.

## 'Compromise' urged over certificate

Council should seek a compromise on the new registration certificate, a special general meeting of the Pharmaceutical Society decided on Monday.

Some 188 members overwhelmingly supported the following motion, proposed by Mr Howard Turner: "In view of the criticism of the new registration certificate the Council is requested to reconsider this matter and to reach a compromise acceptable to the membership.

The president, Professor A.H. Beckett, opened the meeting with an announcement that because of their interest in the subject, students and preregistration graduates would be admitted, although they could not vote. The secretary and registrar, Mr D.F. Lewis, then showed a series of slides, comparing previous certificates to the new one. Although the slides were said to give the relative sizes of the certificates this was called into question by a speaker from the floor, and the president called for the actual size of the written area (or that bounded by the margins) on the types of certificate to be established.

#### Council's intransigence

Proposing the motion, Mr Turner recalled the correspondence in the Society's journal, and the protests by the British Pharmaceutical Students Association and the Branch Representatives. He said that in spite of this the Council had remained intransigent, and there appeared to be no effort to reach any kind of compromise with the membership. "It would be a fine gesture for the Council to make to their vounger colleagues, to show that their feelings are appreciated, and to give them a deserved welcome to the profession, rather than the false start that has recently occurred.'

Mr Turner said the general reduction in size and artistry of the new certificate was of undeniable significance, and noted there had been no hurry on behalf of members of Council to change their certificates. "Two distinct levels of pharmacists have been created in the eyes of the public," he claimed. "The new certificate is an object of pride, and the new design is simply not good enough."

On the opinions of members of the Society, Mr Turner said: "To suggest that it would be impossible to discover the

views of the membership, given the regular meetings of local branches, is patently unfounded. In fact the membership would doubtless welcome a democratic move over this and other matters. Indeed, if BPSA and Branch Representatives' wishes are not heeded by Council, then one is tempted to ask whether the Council has any interests in the views of the membership whatsoever. Understandably, the impression gained is that Council's attitude is one of 'ignore the views of the membership and they will go away'.''

The motion was seconded by Miss Marie Noblet, BPSA president.

Before inviting contributions from the floor, the president made a number of points. The matter had appeared on the agenda of the Law Committee — as is anything connected with the statutory certificate of registration — in July. Due to pressure of work it had been deferred until August, and then October (there is no regular Council meeting in September). Since by then a special general meeting had been called, the Council had decided to defer further consideration until the views of the meeting had been learned.

The president said that the membership had never been consulted before about the design of the certificate, and there had been five different types since 1953. He said that although the new certificate was undoubtedly smaller, it was not amateurish, as had been suggested. The lettering and layout were designed by a leading authority.

All speakers from the floor were for the motion. Mr L. Priest, NPA chairman, said the whole question was one of pride, and young members of the Society could not feel proud. The new certificate was too small and the lettering had nothing to compare with the older type. Dignity was sadly lacking in the new certificate and Mr Priest humbly asked Council to reconsider the design and make it something which members and students could be proud of.

Mr Roger Barnett said it was not the size of the certificate which was being objected to, but the type and format, which was a radical departure from previous designs. Dr Jeremy Hyde felt it was the height of irony that in the year when pre-registration graduates were asked to pay a fee to the Society their certificate should be changed so dramatically. However, he said he was proud to be a member of a Society which allowed its members to call a meeting such as this. The meeting was just asking the Council to reconsider and reach an acceptable compromise, and how could anyone object to such a motion?

#### Without honour

Dr Philip Phillips said that although Council did not have to justify the design of the certificate, they were required to uphold the Supplemental Charter. He suggested that it was a prima facie breach of Charter in that the new certificate did not uphold the honour of members in the exercise of their profession.

Mrs Shelia Shipstone supported the motion on behalf of a majority of members of Sheffield Branch of which she is secretary.

The vote was taken by a show of hands, with only two members voting against the motion. The president said the key issues of size and format would be considered by Council. ■



"The certificate on the right is mine"

# Macarthys challenge 'save with profit share' claim

Unichem and Macarthys have received conflicting legal opinion on whether the Secretary for Social Services can or cannot take Unichem's profit share into account in determining member's NHS remuneration.

Unichem have warned of their intention to seek a judicial declaration on the matter (C&D, October 10) and this week their managing director, Mr Peter Dodd, is writing to members detailing "possible savings" if the society wins. Meanwhile Macarthys Ltd are seeking to expedite the decision through a summons issued against both the Secretary of State and Unichem (last week, p818).

Commenting on their action, Macarthys say they are seeking a declaration to clarify the position of profit share schemes in relation to the Drug Tariff following Unichem's letter to its members of October 7, 1981.

"We are advised by leading counsel that in exercising his powers the Secretary of State is entitled to regard profit share schemes as operated by co-operatives in the same light as discount schemes operated by other wholesalers. We intend to do everything possible to expedite the hearing in order that this point of law is resolved beyond further dispute.

"Our present advice is that given cooperation by all parties concerned we should have a declaration early in the New Year. We believe that all pharmacist contractors will welcome an early decision.

"Naturally, we declare an interest in the outcome of this issue as we would not wish our customers to be disadvantaged in any respect. However, we believe most sincerely that it is in the public interest, in that of all concerned with the distribution of medicines to the patient, for our views to be substantiated in the courts."

#### Savings defined

Unichem's latest letter outlines the basis of their case and "the financial benefits" to members of a successful outcome of their claim that the Minister for Health has acted *ultra vires* in treating profit share as a discount.

The letter suggests that the Minister is not empowered to fix pharmacists' remuneration "merely by agreement with the PSNC." It points out that remuneration is set down in Regulation 28 of the National Health Service (General Medical and Pharmaceutical Services) Regulations 1974. "This specifically states that the retail pharmacist is to be remunerated in accordance with a formula, established by the Minister and based on the cost of pharmaceutical products to the retail pharmacist. While it

is permissible in calculating that cost, for the Minister to take into account discounts enjoyed by retail pharmacists, our counsel has advised that it is not legally possible to take into account profit

Monthly	Discount	
Purchases	Off NIC	
£3,001	2.74%	
£5,001	3.73%	
£10,001	5.68%	
£12,001	6.4%	

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The letter adds: "Assuming he is proved right, you should be able to recover from the DHSS the claw-back you will have suffered from June 1, 1981, to the date of the hearing, which is expected in about 12 months' time. Additionally, you should be able to recover the sum withheld for the period October 1, 1980 - May 31, 1981."

share paid by Unichem to its members."

Unichem have calculated examples of possible savings:

Discounted	Possible	
Per Month	Savings per year	
£82.22	£987	
£186.50	£2,238	
£568	£6,817	
£768	£9,217	

Above £12,001 there would be possible savings of £768 per year for each extra £1,000 purchases per month. ■

# **Election of PSNI** president

Mr Rodney J.G. McDonald was elected president at the October meeting of the Council of the Pharmaceutical Society of Northern Ireland. Proposing his election Miss Watson said Mr McDonald was one of the younger school of pharmacists and she thought he would bring a fresher outlook to the Council's work.

Mr McDonald said he would endeavour to continue the work started by

Miss Watson in an endeavour to involve the younger pharmacists in the affairs of the Society. A beginning had been made in that a meeting would be held in Ballymena on Monday, October 26, and it remained to be seen what support would be forthcoming for regular meetings. He congratulated Miss Watson who had had a busy year of office and represented the Society at meetings and functions in a most acceptable manner. Mr J.H. Galbraith was elected vice-president and Mr G.E. McIllhagger was re-elected as honorary treasurer having already completed six years in that office.

#### 'Shadow' Boxing Day

There appears to be some confusion over the status of Boxing Day, occuring this year on a Saturday. It is not a bank holiday as the Government has a policy of arranging substitute holidays to be declared by Royal Proclamation whenever a bank holiday falls on a Saturday or a Sunday, and is not transferred automatically to a weekday under the Banking and Financial Dealings Act.

The Pharmaceutical Services Negotiating Committee has made representations to the DHSS to have the Saturday treated as a public holiday as far as payments for rota services are concerned. The DHSS has not yet reached a decision on the matter, but are expected to do so shortly. It is likely that the Saturday will be treated as a public holiday, and any payments made on that basis.

Few of the major High Street retailers plan to open on December 28, with the exception of Woolworth. Boots are making arrangements according to the region and the local FPC. ■



Miss Margaret Hawthorn of H. Neil Watson, Bannockburn Buildings, Tarbert, Argyll, is winner of the Glasgow regional final. In second place was Miss Sylvia

Smart (third from left) and third Mrs Elizabeth Shields (second from right). The regional final was organised by ICML Central Office.

# 'Comprehensive overhaul' for bargain offers law?

The Director General of Fair Trading, Mr Gordon Borrie believes there is a case for a "comprehensive overhaul of the existing law (relating to bargain offer claims) through primary legislation" to build in more precision and certainty for traders and enforcement authorities and also a degree of flexibility to deal with unforseeable anomalies.

Mr Borrie says: "By recognising the dynamic nature of retailing in a market economy, such an overhaul would go a long way towards meeting the concern expressed in the Minister's statement of February 18 about the complexity of the present Order and the need for prohibiting misleading price comparisons without preventing honest traders from drawing attention to the fact that they quote competitive prices."

Mr Borrie commissioned research into consumer and trader attitudes and sought the views of customers, Trading Standard Departments and representative organisations in his review for the Minister of State for Consumer Affairs, Mrs Sally Oppenheim, of the Price Marking (Bargain Offers) Order (July

1979)

The research showed that the principle of legislation on bargain offer claims is "generally accepted" but the aim of any amendments must be to "minimise misunderstanding on the part of the consumer, while limiting the burden on the trading community and the enforcement authorities" — a majority of trade associations are in favour of amendments to reduce problems of interpretation and facilitate enforcement of the law.

#### Amendment proposals

Any new law would incorporate suggestions made for amending the present Order and parts of the Trade Descriptions Act suitably adapted or amended. As this would be a longer term option, Mr Borrie points out that amendments to the existing Order could be made while further consideration is being given to a more fundamental revision of the law.

If the amendment option were to be pursued (by the Government), the changes

Mr Borrie would recommend include:

Making it clear that a previous price or charge must be stated or calculable.

Making it clear that the terms, "normal," "usual" and "regular" when applied to prices are indications of a previous price.

Defining the term "previous price" as one which had been offered for a period of 28 consecutive days in the previous six months and placing the onus of proving this on the trader.

☐ Imposing a complete ban on comparisons with recommended retail prices.

Ensuring that comparisons are made with prices at other identified premises or of traders only in the area where the goods are offered.

☐ If the sectoral approach is continued (where comparisons with recommended retail prices are banned in only some sectors), then, in the areas free from this ban, traders making comparisons with a recommended retail price must state it in cash terms.

Ensuring that traders are prohibited from using a recommended retail price they have established themselves as a basis for price comparisons.

He also recommends legislation to control claims which do not state a specific price or charge and to relax the periods of notice and for instituting prosecutions under the Prices Act.

## Green-lipped mussel extract found 'safe'

Green-lipped mussel extract has been cleared in a "full toxicological assessment" carried out in New Zealand. Mr John Croft, a marine scientist researching the therapeutic potential of sea creatures, told a Press conference in London this week that standard toxicity and teratogenicity studies of the extract had shown no adverse effects in rats given high doses over long periods.

The tests were done at the University of Auckland's department of medicine where researchers are also trying to identify the extract's anti-inflammatory principle. Mr Croft said much progress

had been made over the past year and the active ingredient appeared to be a high molecular weight protein, unlike any known anti-inflammatory agent.

Mr Croft's latest interest is extract of Pacific oyster which contains the amino acid taurine, currently being investigated as an anti-diabetic agent in medically-supervised, controlled clinical trials in Japan.

#### BDA comment

However, the British Diabetic Association believes there is no evidence to support its use in diabetics and, according to a spokeswoman, sees no reason to undertake similar trials.

# Conditional discharge for pharmacist

A pharmacist who had a personal drugs problem was granted a conditional discharge at Old Street Court last week for failing to make entries in his drugs register.

Derek Ratsma, 52, whose shop is in Homerton High Street, East London, pleaded guilty to failing to enter details of amphetamines supplied to him by wholesalers and he asked for 30 similar offences to be taken into consideration. When Ratsma first appeared in court on

April 30 the magistrate postponed passing sentence for six months to see if he could "remain free of drugs".

Miss Ann Mallalieu, defending, said the lapse had come about because of domestic pressure made worse by the death of his partner. "He has not had any drugs and appears to be in a much better physical and mental shape than when he was last before the court. But he still faces some disciplinary action from within his profession," she said.

Magistrate Mr John Nichols commented: "This court takes the view that this was an isolated incident and was brought about partly by stress. This should not be regarded as a general breakdown in Mr Ratsma's service."

# Revision of recall system likely?

The emergency procedure for recalling defective medicines seems likely to be revised, at last. Regional pharmaceutical officers are meeting with Department of Health officials next week and will probably be discussing a draft paper suggesting a revision of the system.

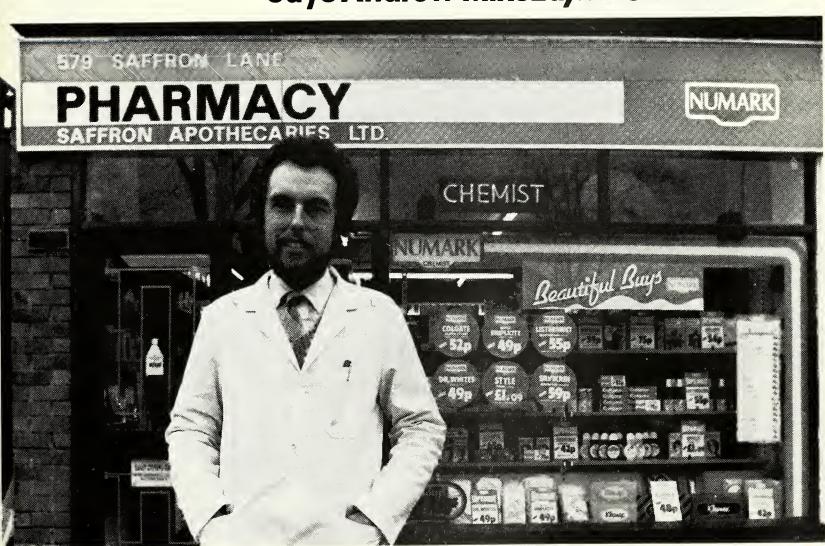
The Department of Health has stressed that the revision is not in response to a publicised incident in June where a brand of hydrocortisone injection was wrongly withdrawn, but hospital pharmacists have been asking for a review of the recall system for some time, with little response until now.

In the June incident, a report from a Scottish hospital implicated Organon's hydrocortisone sodium succinate in causing adverse reactions and all batches of the injection were then "frozen" using a telephone alert. The following day it was discovered that the wrong brand had been implicated — the drug under question was Glaxo's Efcortesol batch OHP 115. The DHSS has stated that the faulty recall would have happened whatever the procedure since it was not the system itself that was at fault in this case but the information received.

Chemist and appliance suppliers in Scotland dispensed 2,752,205 prescriptions in July at a gross average cost of £3.79.

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sell products - and not just those on promotion."



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#### PEOPLE

#### TOPICAL REFLECTIONS

#### By Xrayser

#### Appointments at C&D A simpler



John Skelton, BPharm, MPS, has been appointed Assistant Editor of C&D; he joined the editorial staff in November 1980 from Ideal Chemists Ltd of Bristol where he was managing director. A graduate of Bath University, Mr Skelton completed his postgraduate year in the research and development laboratories of Reckitt & Colman Products Ltd, pharmaceutical division, in Kingston upon Hull. He registered in 1968 and after a period in retail in the City of London joined the seven-pharmacy group of Ideal Chemists and became their managing director in 1972.

Judy Bargh, BPharm, MPS, has been appointed Technical Editor. She joined the editorial staff last year, having previously worked at St George's Hospital, London and as a locum retail pharmacist. Ms Bargh graduated from Bath University in 1976 and undertook her pre-registration training at St Thomas' Hospital.



Professor P.F. D'Arcy, head of the department of pharmacy, Queen's University of Belfast, was at Buckingham Palace last week to receive the OBE awarded in the Birthday Honours List. He is pictured with his wife Elizabeth and was also joined by son Anthony and daughter Mrs Anne Ottoway

# A simpler contract

I've only had ten minutes to look at the graph of the proposed "no on-cost" contract, but true to my commercial nature the first thing I worked out was how I would fare. Since I average less than 2,000 scripts a month it would appear that I will lose about £40 a month — say £450 a year — from the change, which does not fill me with joyous anticipation of receiving the advantages of greater simplicity.

The loss to those other contractors in my position will be seen as a proportion of our gross cheque — and it's too high. Yet if that were corrected there are attractions in the scheme, not the least of which is that if a Government should decide to limit the amount prescribable at any one time by a GP so as to cut the drugs bill and limit waste, then our income would not fall in line with a drop in the value of drugs supplied. But if actual drug costs are to be paid then we ought to consider asking the true cost of the containers we use even though it may mean another endorsement on the script giving the size of bottle used. But that's a minus thing.

I wonder though — since I understand payment of dispensing doctors is based on what we negotiate — whether in setting up this changed pattern, the DHSS would find themselves too embarrassed to make full payment of a pharmaceutical practice allowance to the GPs. This is because they are already paid for their professional services as part of their general practice allowance, but cannot pretend to give the public the wide ranging pharmaceutical services this new allowance is intended to recognise. Could be an interesting development?

#### Jarring

It isn't all that long ago that the husband of a lady who had bought a moisturiser from me (an expensive item from one of the big cosmetic houses) came into my shop to remonstrate, firmly, over the actual amount of product which the jar held. It seems he had accidently dropped the jar, and the plastic broke, leaving him holding a ludicrous object composed of a two inch lid attached to a tiny container which bore a passing resemblance to one of those throw away butter containers you are given in cafes and airliners.

Although it wasn't what he was after I exchanged it for another product, without mystique, but giving demonstrably better value for money, and thanked my lucky

stars he accepted instead of pursuing me into court for misrepresentation as he initially intended. I was on his side for I could remember the days when my old boss, who used to have us packing nostrums all day, found a range of panel bottles so craftily made that a big one, which on sight looked like six ounce, actually held only 1½ ozs of liquid. With carton and packing as well the impression was of outstanding value for money. Who could doubt the intention?

Though we haven't seen such bottles for years it is hardly surprising that one of the current toiletry manufacturers has finally been called to account; that it was Gibbs-Pears or Unilever was just the luck of the draw, yet since this must have been in the nature of a test case it looks as though we will be seeing a flurry of new packaging for one or two (or even all?) of the cosmetic houses soon?

#### Sunglasses

As could have been predicted at least one of the three big spenders in this field has been forced to cut his losses — Goggles are to go to the swag man and Gibbs are licking their wounds for the second time this week. Never mind, we all make our mistakes with the losses being seen as a minor part of our whole turnover.

Personally I feel most of my customers think of sunglasses as an annual event, essentially disposable, and therefore resent having to buy up-market products because there are few low priced ones. The times I've been asked for something cheaper is without number and when you consider that the landed bulk cost from Taiwan and other places East is only some 70 or 80 pence each, I think it is about time they were marketed more reasonably.

Next year will see me with a few cutprice Polaroids and six or seven dozen assorted models from a specialist importer whose offerings look the same to me as high cost branded goods but are half the price. Don't write and ask me the firm's name; it was published in the last C&DSupplement and I wrote to them.

## Aerosol format for headlice product

A headlice product, already successful in France, Canada and Australia is to be launched in Britain this month by De Witt International.

Parlice, which comes in an aerosol presentation with diffuser tube, is a "revolutionary product which opens up what is truly a totally new preventative market for all the other members of the family", claims De Witt. It is also effective on body and pubic lice they say. The product is sprayed into the hair at the roots and acts immediately. Thirty minutes later the hair should be washed with an ordinary family shampoo, rinsed and combed.

Total and continuing protection is provided for all the family by a quick light spray into the hair every two or three days. There is no need to touch the scalp.

Each aerosol is estimated to give 200 one-second sprays, (40-60 applications).



The active ingredients include Bioallethrin, a synthetic pyrethrinoid, along with a synergist.

The company claims that per application it is the cheapest headlice product on the market, and, because it's an aerosol, there is no waste. Retail price is £3.25 and launch discounts are available. De Witt International Ltd, Seymour Road, London E10.

**Indications** Prevention and treatment of infant colic

**Dosage** 0.5 to 1ml before feeds. Maximum daily dose is 4ml. The bottle contains a graduated dropper and the suspension can be placed directly into the back of the mouth or mixed with a small amount of food

Contraindications Sensitivity to dicyclomine or dimethicone. Suspected or diagnosed glaucoma

Side effects Rash, constipation, anorexia vomiting, dysuria and dyspnoea may occur but are rare at the recommended dosage. Symptoms of overdosage are dilated pupils, dry mouth, difficulty in swallowing and hot, dry skin Packs Bottles of 15ml (£1.60 trade) Supply restrictions Pharmacy only

#### Metilar withdrawn

Issued November 1981 ■

Syntex Pharmaceuticals have discontinued the manufacture of Metilar from October 30 and will not accept further orders for the product. They are unable to accept returned stock for credit. Syntex Pharmaceuticals Ltd, St. Ives House, St. Ives Road, Maidenhead, Berkshire SL6 1RD.

#### Kirbychlor 100s

The 70-tablet Kirbychlor pack is being replaced with a pack of 100 tablets (£4.20 trade) which will be phased in over the next two months. The old pack will be discontinued on December 31. Kirby-Warrick Pharmaceuticals Ltd, Mildenhall, Bury St Edmunds, Suffolk IP28 7AX.

#### Rubinstein offer

From November 23 while stocks last three collectons of Skin Life products will be available from Rubinstein for £5.95 each. Coming in red mirrored cases each collection comprises either four preparations for a complete daily skincare regime or a selection of makeup items in a choice of two colour combinations.

Helena Rubinstein Ltd, Central Avenue, West Molesey, Surrey KT8 ORB.

# Fragrance launch by new company

Available from a new company, Les Parfums Chandoré is a new fragrance of the same name — Chandoré parfum handbag size (7.5ml, £5.50), eau de parfum atomiseur (15ml, £6.50) and eau de parfum (32ml, £6.50). Display units,

showcards and sample vials are available. Les Parfums Chandoré, Gloucester House, 2 Ashtree Avenue, Mitcham, Surrey. ■

#### Mentholyptus repack

Packaging for Mentholyptus medicated confectionary has been redesigned. All flavours carry a larger, gold logo except for extra strong which retains its silver logo. The cartoon character "Mentholyptus man" is featured on outers, bags and jars to strengthen the link with the advertising and also appears on POS material. Warner-Lambert Consumer Products Division, Mitchell House, Southampton Road, Eastleigh, Hants SO5 5RY.

# PRESCRIPTION SPECIALITIES

#### Ovol drops

Manufacturer Pharmax Ltd, Bourne Road, Bexley, Kent DA5 1NX Description Yellow suspension containing 10mg dicyclomine hydrochloride and 40mg dimethicone per ml

#### Sustac 10mg strength

Pharmax are introducing a 10mg strength Sustac tablet. Recommended dosage for the prophylaxis of severe angina is one tablet three times a day. The appearance of the tablets is the same as the 2.6mg and 6.4mg strengths. They are packed in amber glass bottles of 100 (£9.90 trade). Pharmax Ltd, Bourne Road, Bexley, Kent DA5 1NX.

#### Bactrian cream

Bactrian antiseptic cream is being relaunched in a 45g tube (£4.20 per dozen trade). The cream contains cetrimide 1% w/w in a non irritant base, and an initial stocking bonus is available. J.M. Loveridge Ltd, 6 Millbrook Road, Southampton, Hants. ■

#### CAM update

CAM bronchial antispasmodic syrup has been repackaged in an amber bottle with bronze pilferproof and leakproof cap. Label design has also been updated. The formulation remains unchanged. Rybar Laboratories Ltd, 25 Sycamore Road, Amersham, Bucks SL6 1RD.

## Liquid soap in Southern test

Another liquid soap is being introduced, but on test-market only — in the Southern television area.

The soap is called Elan and is manufactured by Soilax Ltd, a company new to toiletries. The recommended retail price is £0.95 for 250ml but it is expected to sell at between £0.79 and £0.89. Television advertising starts this month and there will be a door-to-door coupon drop on November 9. Soilax Ltd, David Murray John Building, Swindon SNI 19D.

## Twenty herbal medicines

A range of herbal medicines are now available from Herbal Laboratories. There are 20 products in all:— herbal artiform (100 tablets, £1.93), herbal circuform (100 tablets, £2.69), herbal restful night (100 tablets, £1.54), herbal kelp seaweed (300 tablets, £1.26), herbal nerve formula (100 tablets, £1.93), herbal cyst-aid (100 tablets, £1.93), pile tablets (100, £1.62), comfrey tablets (100, £1.54), herbal blood purifier (100 tablets, £1.62),



TCL (throat, chest and lungs) herbal emulsion (300ml, £1.38), herbal digestive tonic (150ml, £1.38), Doubleday comfrey plus ointment (30g, £1.23; 60g, £1.93), herbal ladies middle of life (no product licence — 100 tablets, £3.69), herbal African devil's claw (no licence, 100 tablets, £2.99), herbal boldo (no licence — 100 tablets, £1.46), herbal ginseng (no licence) — Korean (30 tablets £3.40), Siberian (30 tablets, £2.49), B6 megavitamins (no licence, 100g, £3.69) and lecithin granules (no licence — 250g, £2.99). Advertising will run in the Health Food Trader. Herbal Laboratories Ltd, Fleetwood Lancs.

#### Marigold 36s

Packs of three dozen Marigold lightweight house gloves (medium size) are to be discontinued from November 15. The gloves will continue to be available in packs of one dozen. LRC Products Ltd, North Circular Road, London E4 8QA. ■

# Yardley emphasise moisturising

Skin moisturising is getting a boost with several introductions from Yardley this month. A new product — cream foam bath — is available in three fragrances,

The range of Christmas POS material designed by Wilkinson Sword for displaying their range of razors and blades. It comprises four header cards (to fit two sizes of prong unit, Mark II traffic stoppers, decals and shelf strips. Wilkinson Sword, High Wycombe, Bucks

Laughter, Chique and Je Suis. It retails at £1.65 (150ml) and is a complementary product to the existing fragrance ranges.

There are two new hand and body lotions in Lily of the Valley and Roses fragrances (150ml; £1.75) and the company are re-introducing vitamin skin cream. This is described as a thick night cream, rich in natural oils, which can be used as a massage cream for face and body. It is available from Yardley consultant outlets, retailing at £2.95 (75ml). Yardley of London Ltd, Miles Gray Road, Basildon, Essex. ■



## Rutivite repackaging and additions

Rutivite original has been repackaged and a new container of 66 tablets (£1.90) is now available alongside the 250 and 500 tablet packs. Rutivite heart ease formula (90 tablets, £2.75) is a new introduction as is Rutivite E (50 capsules, £3.95). Available to support the new packaging is a mini poster, shelf card and pack tag. Rutin Products Ltd, 8 Union Street, Pocklington, York YO4 2JL.

## Pharmaton's New Year resolutions

A £100,000 promotional budget for 1982 has been announced by Pharmaton. In addition to advertising in women's magazines and specialist publications, a nation-wide campaign with a leading leisure company is planned. The company will continue to support Leslie Watson who broke the ladies' 50-mile world record earlier this year. Pharmaton Ltd, West Lane, Runcorn, Cheshire WA27 2PE.

#### ON TV NEXT WEEK

WW Wales & West We London Westward M Midlands So South В Border Lc Lancs NE North-east  $\mathbf{G}$ Grampian Yorkshire Anglia Eireann Scotland Ulster Channel Is

All Clear shampoo:
Anadin:
Anadin:
Askit powders:
Sc, G
Bic razors:
Ln, Y, NE, We
Colgate Dental Cream:
Complan
Ln, Y, Sc, WW, So, NE, We, G
Crookes One-a-day multivitamins:

M, WW, We, Lc, Sc, So, CI

Denclen denture cleaner: M, Lc, Y, NE

Head & Shoulders: Ln, M, Y, Lc, A, U, B
Impulse: All areas
Keystone 308: Y, NE
Macleans: M, Y, NE, A, Sc, U, We, B, G

Marmite: Ln, M, WW, So, A, We, Cl Mucron decongestant: U Ovaltine milk chocolate bars: All except E Pharmacin: All areas

Paddi Cosifits:All areasPhilishave:All areasSanatogen multivitamins:All areasSilvikrin shampoo:All areasVitaplus multivitamins:

M, Lc, Y, NE, WW, A, We

# FISTUM Wunns E



Presentation of August Kodak Award for Quality. From left to right: Ernesto Jaeonelli, Kodak Teehnieal Sales Representative; Lawrenee Willey, Joint Managing Director, Munns Brothers; Richard Hankin, Works Manager, Munns Brothers; Mike Prince of ATV and Graham Willey, Joint Managing Director, Munns Brothers.

Many congratulations to Munns Brothers of Birmingham who have won the August trophy in the Kodak Award for Quality scheme for independent photo finishers.

This is the first time that this distinguished Birmingham D&P

laboratory has taken the top place in this keenly contested competition. The Company is particularly delighted that it has carried off the trophy during August, which is one of the busiest months in the D&P calendar during which the laboratory is

# first for rothers.

inder the most pressure.

The firm of Munns Brothers vas first founded in the early 920's following the First World Var. At that time the co-founders f the firm were David Willey, an 4-ray photographer, and his artner Bernard Munns who was n artist. The latter originally sed to hand-colour photo-raphic plates!

The Company rapidly xpanded and in 1935 moved to Lamden Street in Birmingham where they now operate the city's

argest D&P laboratory.

The Company is now run by awrence and Graham Willey, ons of the founder, in association with Richard Hankin, who has been Company Production Manager for the last ten years. From the word 'go' the Company has always believed in a contin-

uous reinvestment programme, investing in the most up-to-date technology available in order to produce optimum quality and service.

During the past year they have used the Kodak Finisher Monitoring Service, and they believe that as a result of this action the quality has dramatically improved.

They regard winning the award as a total staff effort which has ensured that the finished product is of the highest possible quality.

#### The Kodak Award For Quality.

The competition is open to all independent photofinishers who use Kodak 'Ektacolor' Paper and formulated chemicals. Kodak and its subsidiary companies are excluded.
All photofinishers who regularly and continuously return full sets of quality monitoring strips to the Kodak Finisher Monitoring Service are automatically included in the scheme, which runs from April to October, 1981.

# Smile. It's on 'Kodak' paper.



## Bonuses on Algipan display cards

Wyeth Laboratories are offering pharmacists only an opportunity of gaining bonuses of up to £12 on Algipan.

Mini-merchandisers are now available each carrying on the back of the display card three "stamps" marked November £2, December £4 and January £6.

Pharmacists displaying the merchandisers when the Wyeth regional sales manager makes random calls will win the appropriate bonus for that particular month. Wyeth Laboratories Ltd, Huntercombe Lane South, Taplow, Maidenhead, Berks.

#### **Strong support**

SOS Talisman are to feature sportsman Geoff Capes in their pre-Christmas magazine advertising campaign. The advertisements will appear in — Woman, Woman's Own London Section, Woman's Realm, Woman's Weekly, Sun Day, Athletics Weekly, Ski, The Gymnast, Diver, Motor Cycle Mechanics and Motor Magazine. SOS Talisman Co, Ltd, Unit 6, Hale Wharf Estate, Ferry Lane, Tottenham N179QL.

#### Simpla changes

Simpla have replaced all their "R" type leg bags by individually-wrapped products supplied in bulk without straps. Short tube bags are available graduated to 350ml, 500ml and 750ml and long tube bags as 500ml and 750ml. Straps are now available separately in 100's.

S1 urine drainage bags are now packed in both bulk and individually and retail header packs of 25 can be supplied for PVC mattress and pillow covers and NHS poly gloves. Simpla Plastics Ltd, Phoenix Estate, Caerphilly Road, Cardiff CF4 4XG.

#### **Denim TV support**

Denim is to be supported by a £550,000 national television advertising campaign this Christmas. *Elida Gibbs Ltd, Portman Square, London W1A 1DY*.

Independent Chemists Marketing Ltd are no longer the UK distributors for Valda pastilles.



The range of "Pleasure Plus" products again form the centre of Napcolour's Christmas promotions. The promotion offers a total saving of £1.60, encouraging customers to save £1.00 on table mats and £0.30 on photo drink coasters and jigphotos, produced from their own negatives.

Napcolour are also giving away

Christmas card calendars with every colour print, provided three or more prints are ordered from a single negative or transparency. A counter card is available and a colour leaflet is enclosed with all work returned to customers. Napcolour Laboratories Ltd, Napcolour House, Chichester Street, Chester CH1 4QD.

## **November offers from Unichem**

A selection of products from Unichem's sundries range are on offer to members during November in addition to the members offers. These are Cannon Babysafe range, Croydex Ring bath mats and shower sprays, Unichem manicure ranges, hushabye soothers, mattress cover, Kent Headhog ladies hairbrush, Dundee baby bibs, Addis soap dish and nailbrush, Wisdom duet toothbrushes, and Thermos roughneeks.

Health foods on offer include Red Kooga tablets and capsules; Healthcrafts Gev-E-tablets, Super A, B. Compleat, high potency vitamin C, Super E, Aminochel multiminerals and GEB combination. *Unichem Ltd, Crown House, Morden, Surrey*.

#### Numark

November consumer savings from Independent Chemists Marketing Ltd are available on Terry nappies, Lotus shampoo, nail polish remover, bubble bath and cold cream, Nuhome toilet rolls, aluminium foil, kitchen rolls, family tissues and mansize tissues.

Savings in the Nusoft baby range are available on 50g, 100g and 250g nursery wool, pull-on baby pants, large and small size pleats and economy and standard white and coloured puffs.

Finally three additional sizes are being introduced into the Numark range of

counter bags — NM1, NM8 and NM9 — bringing the range in line with the NPA counter bags. During the November promotion an extra 10 per cent discount will be offered on these and other NPA counter, prescription and carrier bags. Independent Chemists Marketing Ltd, 51 Boreham Road, Warminster, Wilts.

#### Sangers

Shopper Stoppers for November include Andrex toilet rolls, Bic disposable razors, Euthymol toothpaste, Harmony hairspray, Kotex Simplicity 1 and 2, Lucozade, Milumil, Milupa, Mum Quick Dry, Nice 'N Easy, Paddi Cosifits, Pin Up, Scotties mansize and tri ply, Silvikrin shampoo, Steradent tablets and deep clean and Vidal Sassoon shampoo and finishing rinse. A kit of Christmas display material is available free with purchases of ten cases in the monthly offers. Sangers Group Ltd, Cinema House, 225 Oxford Street, London W1R 1AE.

#### Vestric

Vestric is featuring photographic film on its national promotions leaflet for the first time this month. Their top 30 best selling camera films, are listed and the leaflet also incorporates an insert regarding Vestric's expansion in the health foods market.

Other items included are Gillette Right Guard deodorant and anti-perspirant, Johnson baby power, Kleenex for Men, Elnett hairspray, L'Oréal Recital and Libra press-on towels. Vestric Ltd, West Lane, Runcorn, Cheshire, WA72PE.

## Marigold Winter campaign

LRC Products are launching a Winter promotional campaign to boost sales of its Marigold range. Consumer and trade activity running until March is expected to produce a 20 per cent uplift in sales.

A 5p money-off coupon will be inserted in all packs of extra and lightweight on sale until the end of December. Beginning in February, a consumer competition will be flashed on three million packs of all three brands with prizes of video recorders, cassette players and electronic alarms to be won.

Using the theme of darts, a three-fold trade promotion entitled the "Marigold Treble" will run for six months to complement the consumer activity. A gala evening will mark the completion of the Marigold Treble and there will be opportunities for LRC's trade guests to challenge the skill of Eric Bristow, current world professional darts champion. For every point scored against Bristow, LRC will donate £1 to the Stoke Mandeville Hospital appeal. LRC Products Ltd, North Circular Road, London E4 8QA.

#### **Branded conditioner**

Steiner are offering a free 100g conditioner (£1.65) with every 200ml shampoo purchase. A display holding 12 retail units is available. The banded pack is available while stocks last. Richards & Appleby Ltd, Gerrard Place, Skelmersdale, Lancs.

#### Airwick price offers

Four on-pack price-offers now available are on 270ml Gumption (£0.33), Air Wand refill (£0.47) and Airwick solid (£0.49) as well as Blue Guard flush-colourant (£0.55) returning 25 per cent profit. Beecham Proprietaries, Beecham House, Brentford, Middlesex.

## **Bob Martin updates** and additions

Bob Martin have added vitamin granules (£1.45) to their range of vitamin preparations for dogs. The granules complement the condition tablets and qualify for the Bob Martin 50 per cent retail mark-up.

Simultaneously the company is relaunching its range of a dozen products in new-look colour-coded blue livery, to match the repackaged condition tablets. A new product is also introduced into the range — fresh breath deodorant tablets (£1.45) for dogs and puppies. Other additions include laxative tablets, (£0.36), stomach disorder tablets (£0.61) and antiseptic ointment (£0.62) to the Tibs for cats range. The Bob Martin Co, 61 Hoghton Street, Southport, Merseyside PR9 OPL.

## NI distribution of Babes baby products

Babes Baby Products have appointed Barclays Agencies, Newtownabbey as their sole distributor in Northern Ireland. The launch to the Ulster market is to be backed by a heavyweight campaign on Downtown Radio. Babes Baby Products Ltd, 148 The Broadway, West Hendon, London NW9 7AA.

Which expectorant should you 'counter prescribe' for a lorry driver?



Give the thumbs up to

# Franciyn Expect.

WinPharm's entirely new treatment for chesty coughs

- \* Ideal pharmacological profile
- \* Rapid action, prolonged relief
- \* Does not cause drowsiness



Working with pharmacy for a healthier future

Each 5ml of Franolyn Expect contains Theophylline BP (Anhydrous) 60mg, Guaiphenesin BPC 25mg, Ephedrine BP 4.75mg, "Franolyn" is a registered trade mark. Full information is available from WinPharm, Sterling-Winthrop House, Surbiton-upon-Thames, Surrey, KT 6.4PH

#### Instant milk from Health & Diet

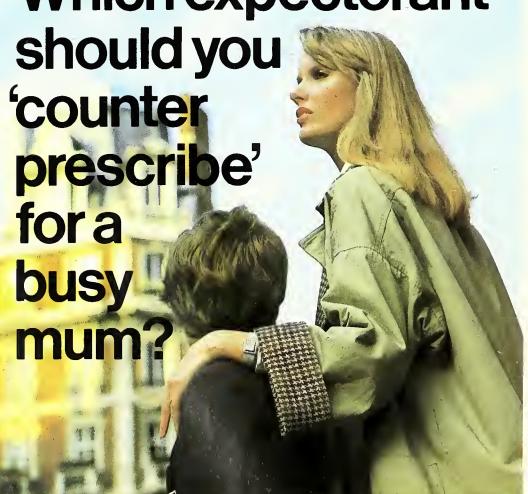
Pantry Stock instant skimmed milk power can be used in a "calorie controlled diet" and contains approximately half the calories of whole milk — 34 per cent protein and 1.5 per cent fat. The 220g tin makes 2.3 litres when made up with water or can be sprinkled directly into tea or coffee. Health & Diet Food Co Ltd, 79/81 High Street, Godalming, Surrey GH7 1AW. ■



#### Images from Arden

The Images make-up kit from Elizabeth Arden is presented in a mirrored compact with a single pull-out drawer, packaged in russet and gold suede-effect box. The kit, which retails at £7.50, is now available and contains flawless finish make-up, toasty beige and cheek colour, wild clove; silky eye shadow, golden grape, dovetail, gilded bronze, honey light; gloss over, clear and conditioning lash thickener, very black. Elizabeth Arden, 13 Hanover Square, London W1C 0PA. ■

# Which expectorant



Her shopping list should include

WinPharm's entirely new treatment for chesty coughs

- \* Ideal pharmacological profile
- \* Rapid action, prolonged relief
- \* Does not cause drowsiness



Working with pharmacy for a healthier future

#### Baby bib offer from J&J

By collecting five tokens on packs of Johnson's baby dry one-way liners, completing the order form and sending them in with 14p towards postage consumers will receive free two Ashtons



terry towelling baby bibs. The bibs are white and trimmed in either pale blue or pink. Shelf strips will be available at POS. Johnson & Johnson Ltd, 260 Bath Road, Slough, Berks SL1 4EA. ■

#### **Debs ticket** incentive

A lucky ticket incentive from Robinson's of Chesterfield is being run for retail chemists displaying the Robinson cotton wool range. Tickets are inserted into glass jars containing Debs cotton wool balls which are being distributed by the sales force. First prize is a weekend for two in Paris with runner-up prizes of Cornelia James silk shirts, silk scarves and pairs of Pretty Polly tights. Everyone wins a prize says the company in the incentive scheme which runs throughout November and December. Robinson's of Chesterfield, Wheat Bridge Works, Chesterfield. ■

# Here's a very absorbing sales story!

There's nothing 'softly, softly' about the selling effort we're putting behind new Bobtails...

\*Colourful ads in the motherand-baby press

\*Consumer couponing

\*Sampling schemes

\*Regular trade promotions

\*Exciting point-of-sale

It all adds up to a hard-hitting sales drive. To promote a message that is softness itself. New Bobtails is the message.

Brought to busy mums every-

where by the Tufty Tails people.

It's an all-in-one disposable, of course. But designed to be extra absorbent!

The secret's in the double layers of absorbent quilted filling which effectively absorb what comes naturally in a baby's nappy. So helping to keep baby's bottom smooth, dry and free from irritation.

Available from **SANGERS**Sangers Agencies Ltd., Ramsburg
House, High Street,

Hungerford, Berks. Tel: Hungerford

(04886) 3555 Two handy sizes for both Babies and Toddle<mark>rs.</mark>







As soft as a baby's Bobtail!

#### **PHARMACY ECONOMICS**

# Marginal analysis — a definition of value

by Eric A. Jensen, BCom, MPS, MInstM, FIPharmM

Economics is concerned with the behaviour of men and women in conditions of scarcity of resources in relation to the ends we seek. We do not have enough land, labour, capital, enterprise, to satisfy our every want, as distinct from need, so we have to compromise, to decide on priorities, on what we will give up in order to have something else. A study of marginal analysis will illustrate how practice bears out theory, provided we are careful to remember that pure "economic man or woman' does not exist, that human beings, our customers, are motivated by other influences than the material.

The price of anything — a service or an article — is its value in terms of money, and this price is determined by the marginal, not the absolute, usefulness or utility to the purchaser. There can be exceptions to this rule as we are dealing with people: consider someone entering your pharmacy with a prescription for a life-saving medicine needed immediately for his or her survival. Leaving aside for the moment any legal, ethical and other non-economic restraints, you could demand, and obtain, a price vastly in excess of the normal one. The value of preserving life is, to a dying person, absolute: he or she cannot have a little more or a little less of being alive, as life is absolute. Generally, however, your customers are consciously or unconsciously making their purchases on marginal considerations: buying the more expensive bottle of perfume might mean deferring purchase of a hot water bottle, making the present one do for a few more

#### Marginal utility

Marginal utility, the value of an additional unit of one item as against the value of an additional unit of another, is closely linked with the concept of diminishing, or more precisely, varying returns, discussed in the previous article in this series. The more we have of anything, the less, usually, the value to us of increments. This parallels the (eventual or immediate) diminishing effects on ouput of added amounts of one productive unit to a fixed amount of another.

However, just as there can be increasing returns, so can there be increasing marginal utility in certain rare cases. If, for example, a pharmacist already owns a number of businesses in an area and wishes to acquire another of

great geographical significance to them, this business could be of higher than normal market value to that person. The fact that they already have several pharmacies might not, in these special circumstances, diminish the value of an added one, but actually enhances, it. The same principle applies where an item is needed to complete a set, say of specie jars, where the full set might be worth enormously more that a set minus one.

The theory of marginal utility can be extrapolated into a re-consideration of the orthodox "break-even" concept used to illustrate the turnover required, under stated conditions, to produce a net profit. What is assessed is, broadly, the effect on profitability of marginal additions to the takings. Assuming a pharmacy has "fixed" overheads of £20,000 (including pharmacist's salary) and "variables" (including cost of stock purchased) of 85 per cent of turnover the break-even point will be as shown in the diagram.

#### "Break-even"

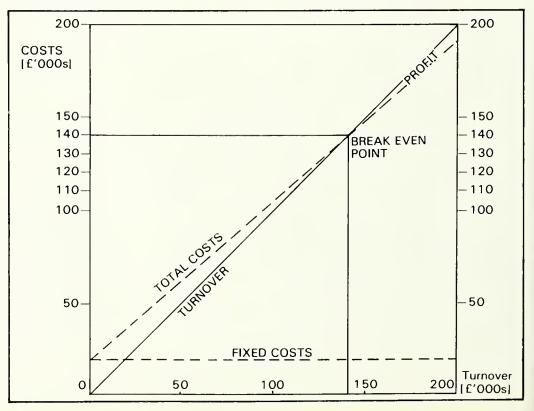
This orthodox "break-even" diagram exhibits the old business truth that once the fixed overheads have been covered any added turnover becomes more and more profitable, "assuming other things remain equal" as economists would say. But other things seldom if ever remain equal and every step we take in our pharmacy

economic or other fields has repercussions elsewhere. Any resource you divert from one type of investment to another must affect both "giver" and "receiver," and time you spend in one direction reduces attention in another part of your activities. You might argue that if you can use a resource more efficiently then one section can gain without another losing, but in these conditions other things have not remained equal and the whole basis of the operation has changed.

#### Turnover caution

It is clear from the diagram that once a certain turnover has been achieved the gap between the turnover line and the total costs, fixed and variable, grows wider and wider. If this tendency could continue indefinitely our prospects would indeed be great, but restraints to this progress develop sooner or later. Failure to realise the implications of being over-eager in seeking for added sales can lead to various kinds of problem, perhaps to business ruin.

At some point after the break even position has been arrived at, it will become impossible to continue to increase turnover without adding to the fixed overheads: an additional pharmacist might become essential; larger premises, or a refit might have to be contemplated; and so on. A new set of basic factors is in being and this could be illustrated by revising the diagram on the presumption of fixed overheads of £30,000 or more. The variables might also change as a percentage of turnover, favourably or unfavourably: expansion of sales and purchasing power could bring higher gross margins, while in order to attract the



customers it might be necessary to reduce prices.

A wise decision on whether to increase fixed and other overheads must be founded on an exhaustive survey of the market in order to assess what sales are possible. Such an investigation cannot give any guarantees but only a forecast taking into account as fully as one can the circumstances surrounding any individual pharmacy and the expected changes in these. We are now in the area of prophecy and all we can do is reduce uncertainty by gathering a maximum of data, by interpreting the data with judgment, by using experience. Assuming the portents seem bright, assuming the necessary turnover appears to be potentially available, we might construct our new break even chart with the larger overheads and accept that we might need to suffer a temporary period of reduced profit or even of loss while the benefits of the investment overtake the costs. If our forecasts prove accurate we should, after such a less profitable interlude, enter a phase of growing profits exceeding those shown in the diagram.

After a time on this new expanding stage we could again reach a position where once more still further investment is needed to bring continued growth, where again a period of reduced profit or actual loss might be necessary. The danger is that the length of the adjustment period might be underestimated, bringing cash-flow problems, or that the market has been misjudged.

#### Lesson to be learned

In the latter case the fate of the business will rest on many factors, on the cash reserves, on the possibilities for alternative uses for the resources which cannot be profitably employed in the pharmacy, on the chances of reverting to a lower scale of operation and of reducing the overheads accordingly, and so forth.

One lesson we might derive from marginal analysis through the break-even concept is that the utmost caution is required when considering substantial additions to fixed overheads and when taking on long-term commitments from which it is difficult or impossible to extract oneself. Margins can be a snare and can lead the unwary to think that what has happened so far in a business will continue to happen. The art is to detect that point at which further expansion will lead to less, not more, profit: many a pharmacy could be more profitable on a turnover not pushed to the limits of the market, certainly in terms of return on investment if not in absolute

When assessing a pharmacy under consideration for purchase, or in reviewing a business already owned, it can be salutary to calculate the probable effects on profit of a marginal increase or decrease in current turnover. A five or ten per cent variation in sales can produce a considerably larger percentage alteration

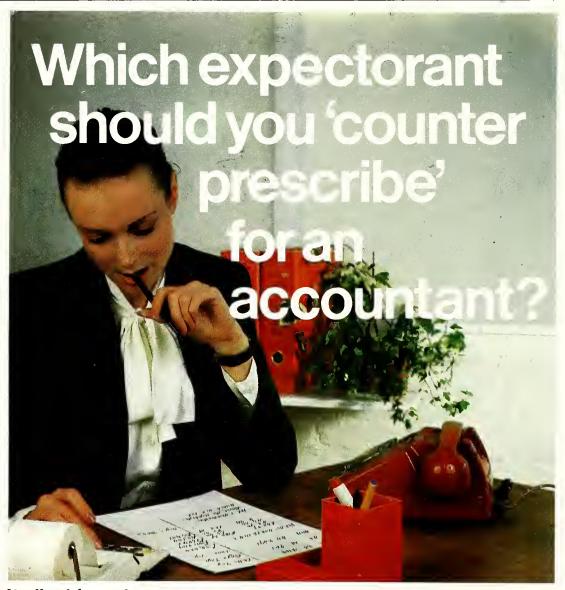
in the net profit: among the reasons for this is the fundamental fact that beneath the marginal changes in variables and turnover is the deadweight of the fixed costs. The term "fixed" here is relative, as in the long-run all costs are variable.

#### Other professions

The idea, important in marginal analysis, that expansion has built-in limits and induces reaction, can be extended into broader pharmaceutical fields. It is widely believed in the profession that it would be advantageous both to pharmacy and to the public if the sale of all medicines were confined to the pharmacy: such a goal is more likely to be reached gradually, by marginal steps, than by absolute overnight decree (if in fact it can be attained at all). But other professions and trades have their ambitions and we might find that as (say) the hairdressers add marginally and

steadily to the science of their job they will be able to make a case for the restriction of sales of all hair products to themselves. And so in time pharmacy could be left with nothing but the medicines, as the hairdressers (or trichologists), the grocers, the health food specialists, each extend the margins of their work and their expertise.

Thus starting with the simple economic truth that, in general, values are decided at the margin, we can arrive at truths about the conduct and organisation of any individual pharmacy and gather hints regarding the future of pharmacy as a whole. If we try to take too much, singly or collectively, the economic checks and balances will inevitably play their part. There is still wisdom in moderation, and also profit.



It all adds up to

# Franolyn Expect.

WinPharm's entirely new treatment for chesty coughs

- \* Ideal pharmacological profile
- \* Rapid action, prolonged relief
- Does not cause drowsiness



Working with pharmacy for a healthier future



Christmas stocking through Sangers Agencies will let you in on the massive £2 million promotion Philips are putting behind their brand leaders, Philishave and Ladyshave, throughout the peak gift buying period.

Starting November 9th, Philips are pushing their new, lower priced Philishave men's shavers with a seven-weeks national TV campaign, with the support of a four-weeks "Money back" national press offer starting November 30th right up to Christmas.

And with ladies' shavers continuing to show staggering growth, Philips are giving their leading Ladyshave range a four-weeks national TV campaign, starting November 23rd, together with a great "Money back promotion," and advertising the latest addition, the Ladyshave Special, in all leading women's magazines.

# bu £2 million don't waste it!



Not just that, there's exciting new packaging and a whole new range of Philips point-of-sale material available from your Sangers Agencies

representative to make sure everyone notices the biggest name in small appliances on your shelves this Christmas.

For more details of Sangers Agencies special Christmas offers, just contact your local representative or send this coupon to our sales office at Hungerford.



**Agencies** 

Distributors of Philips small appliances to the Chemist trade.

Name\_

Position\_

\_Company\_

Address



(Please tick the appropriate boxes)

Please send me more details of the Sangers Agencies/Philips Christmas deals.

Please ask your nearest Sangers Agencies representative to call.

Do you already have an account with Sangers Agencies? YES□ NO□

Sangers Agencies, Ramsbury House, High Street, Hungerford, Berks. RG17 0NF. Telephone: Hungerford (04886) 3555 Telex: 849028

**SANGERS** 

Agencies

#### **POINTS OF LAW**

### **Notices of improvement** and prohibition

Whatever kind of business you are in you may at any time be served with an enforcement notice by inspectors appointed to ensure that the health, safety and welfare laws are being followed.

They will step in where they discover any breach of the regulations. In a shop, the fittings may be considered to be

dangerous, you may have a lack of heating on your premises where the law expects it to be provided, equipment may be in a state where it may cause harm. All these are grist for the mill of the inspector. At first, he may suggest on an informal basis that you put matters right.

However, he has got pretty draconian

powers and if he is not satisfied that you are making reasonable attempts to comply with the law, he can issue you with an enforcement notice.

There are two types of notice. The first is known as an improvement notice and is applicable where there is no immediate danger. What it does, is to tell you to put things right within a specified time. For example, where the heating is not up to standard, you will be told in the notice to take steps to put matters right.

If you think the inspector is being unreasonable, you can appeal within 21 days against an improvement notice to an Industrial Tribunal and until your appeal is heard you need do nothing. The Tribunal after hearing you and the inspector will either confirm that the notice stands or amend the notice or indeed rule that the inspector was not justified in issuing it.

Where, however, there is an immediate danger, the inspector can issue what is known as a prohibition notice which can stop any process an inspector considers dangerous. Even people can be stopped from coming on to premises which the inspector says are dangerous.

Here again, there is a right of appeal to an Industrial Tribunal but unlike the case of improvement notices, once an enforcement notice is issued you must stop the practice listed in the order until the appeal is heard.

Any failure to obey notices when issued or confirmed can result in your prosecution and the imposition of quite heavy fines.

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#### Safeguarding your post

Businesses often have to send material through the mail where the contents of the letter, parcel or package are of particular value.

For packets or letters containing small articles, bank notes, cheques, uncrossed warrants, etc, the registered post offers the greatest security. However, if uncrossed cheques or warrants or banknotes are sent they must be enclosed in special envelopes supplied by the Post

Other material (eg legal documents) can be sent in secure packing provided by yourself. The amount of compensation that will be paid will depend on the fee paid which is additional to the ordinary postage (eg for compensation up to £1,000 a fee of £1 is payable).

If you require proof of receipt, you have to pay an extra fee and complete a form called "Advice of Delivery". It is worth noting that if you hand this in at the time of posting the registered letter or package the fee will be less than if you ask for proof of delivery at a later date. All registered mail, it is worth noting, receives special security treatment from the time it is posted until the time of delivery.

For parcels, there is another service whereby if the parcel is lost or destroyed en route you can receive compensation. Although there is no special security handling as with registered post you can, by paying the appropriate fee (eg 60p for up to £250 of goods) cover the contents.

Finally, if all that you require is proof of delivery of a letter or postal packet, you can use the Recorded Delivery. There is no special handling, and compensation for items other than money or jewellery is limited to a maximum of £18. Again by filling in an Advice of Delivery form you can obtain confirmation that there has been actual delivery of the letter or packet to the address on the item.

# Sickness and the sack — your rights

Some firms, especially those that employ a small number of employees, can be placed in a dilemma when one of their employees is off sick for a considerable period of time — say two to three months.

Can the firm dismiss that employee and if so what will be the chances of that employee sustaining a claim for unfair dismissal? The law does give some guidance but certain precautions are needed when an employer finds himself in this particular situation.

First, it is fair to dismiss an employee through sickness but an employer, in order for that dismissal to be fair, must act reasonably in all the circumstances of the case.

#### Service considerations

For example, an employee who has been with the employer for a large number of years will be expected to be treated more favourably than another employee who has only been with the firm for say, 18 months.

If the employee concerned is a key worker it will be considered reasonable for the employer to dismiss after a shorter period of sickness than when an unskilled worker is absent. This is because the proper operation of the business may depend on the skilled worker being replaced on a permanent basis as soon as possible.

When an employee has been away sick, the employer should not just send off a notice of dismissal in the hope that this will end the matter. Tribunals have often determined that this practice constitutes an unfair dismissal.

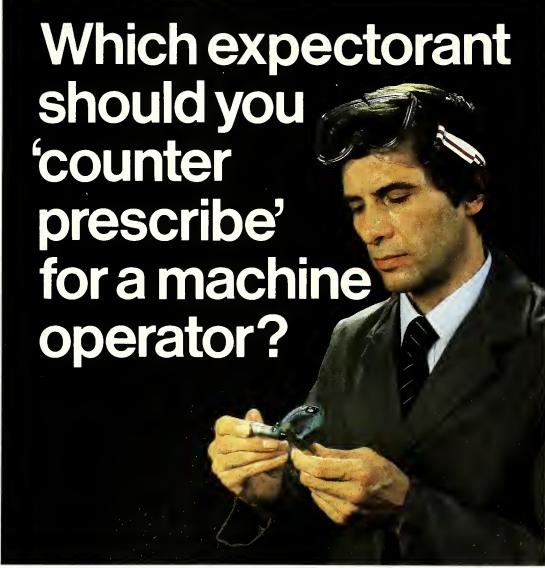
In the case of larger firms procedures have to follow which might include an independent doctor giving an opinion as to when the employee is likely to be able to return to work. This should be done

before any dismissal is effected. In the case of a smaller firm, as a result of recent changes in the law, the procedures do not have to be as formal or as detailed. What should be done, however, is to write to the employee saying that in view of his long absence from work during sickness, dismissal is being contemplated and ask whether he has any comments to make. A copy of this letter should be kept. If he raises no objections, then all well and good. If he does object to being dismissed, then you must ask his permission to approach his doctor to find out whether the prospect of an early return to worth.

If permission is refused, then the employer can go ahead and dismiss since he has acted reasonably. If permission is given much depends on the doctor's reply. If in his opinion the period before return is likely to be long then dismissal can take

place but if he says the employee should be back in a couple of weeks the notice should be held up. Unfortunately the law does not lay down any specific time limits and each employer must make his own judgment. These procedures may appear complex but the law on unfair dismissals is a fact of life and all the consequence have to be faced to avoid a claim for compensation.

Contributed by a barrister



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#### **COMPUTER SEMINAR**

# Pharmacists 'easy prey' for salesmen

Many computer salesmen find pharmacists easy prey because they are "suckers" for new technology, but too busy to look into the details. That opinion was given by Mr Jim Downing, assistant secretary, National Pharmaceutical Association, speaking at a computer seminar organised recently by the Cambridgeshire, Norfolk and Suffolk

Local Pharmaceutical Committees.

Mr Downing said that areas suitable for computerisation were order transmission, labelling of prescriptions, stock control and accounting procedures. It was desirable that there should be a common code for use by all suppliers and a six-figure code was ideal — there was a measure of agreement that the *C&D* Price

List code should form the starting point. If a dispensary system was used for labelling only it was unlikely to be costeffective, and there were similar doubts about point-of-sale computers. Accounting systems only became costeffective when the business could justify employing a part-time book-keeper — the NPA recommended obtaining an accountant's approval before installing such a system.

Mr Downing stressed that a pharmacist needed to be "systematic" to benefit from a computer. He advised prospective purchasers to see one in its working environment and "not to be hoodwinked by the salesmen with his showroom demonstration".

#### **Benefits**

Mr Roger King, a retail pharmacist from Hedon, Hull (whose POS computer installation has been fully described in C&D) explained his system and mentioned some of its fringe benefits. These included a decrease in profit loss through theft, a reduction in cash register and change errors, fewer right-offs and mark-downs, a reduction in employment costs through the time taken to receive orders and count stock, and a lower stock-holding, which had in turn reduced insurance premiums. Mr King said his figures showed that OTC turnover break-even point was about £30,000.

Experience with a dispensary system was described by retail pharmacist Mr Idris Hughes — who has also been involved with computer development for some years. In addition to labelling and stock control etc, he said it gave an indication of drug costs so that the most economical pack size could be ordered; it also showed individual doctor usage of certain drugs.

#### Summing up

Summing up factors to be borne in mind when purchasing a computer, Mr Downing reminded the audience that computers must be kept up-to-date, often by daily entries — if the pharmacist was not an enthusiast he needed to "enthuse" someone else to do this work for him. Also, electronics did not last for ever and it had to be considered whether the purchase price would have been repaid by the time the system required replacing. Mr Downing concluded: "You must know what you are looking for — and pay attention to the small print in the contract".



We submit it should be

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#### LETTERS

#### Augmentin: some points clarified

While reading your September 19 edition, I was pleased to learn of the new British development of Augmentin, from Beecham Pharmaceuticals. This drug, as we all know by now, is a combination of amoxycillin and the \( \beta\)-lactamase inhibitor, clavulanic acid, and without doubt is a major advance in anti-microbial therapy.

However, I do with to express some concern at the way that the data has been presented in relation to the conclusions that we are expected to draw from the article, and I would like to point out certain inconsistencies which have confused me and might require elucidation.

1. Looking at figure 1, it appears that the MIC of amoxycillin for Staph aureus 1555 is 125µg/ml or therabouts, but is quoted in table 2 as 256µg/ml. The MICs of the combination could be similarly criticised were it not for the comment that follows.

#### Constituent ratios

2. From figure 1 again, it appears that the ratio of amoxycillin to clavulanic acid which has the demonstrated effect ranges from approximately 1:20 to 1:2 whilst the proportion in Augmentin is in fact 2:1, where amoxycillin is expressed as the trihydrate. While clearly demonstrating that the combination has a remarkable effect, the relevance to Augmentin is suspect in view of the widely differing

proportions used. 3. From the table in figure 2, eight of the 18 strains have MICs above the peak serum concentration of amoxycillin attained by (presumably) a single dose of Augmentin as shown in figure 3. From these results, I feel sure that a bacteriologist would argue that Augmentin would not be active against these strains, and possibly a few more where the MIC is not attained for an adequate time. Whilst these results are no doubt scientifically correct, their inclusion here fails to demonstrate that Augmentin is active against 95 per cent of isolates from general practice as is claimed in various literature hand-outs — unless, of course, they are only rarely found in general practice, in which case their inclusion in this table would be irrelevant. 4. If the strains where the inclusion of clavulanic acid has shown no reduction in MIC are ignored, we are left with only four strains where clavulanic acid has improved the useful spectrum of amoxycillin. Hopefully these are **B**-lactamase-producing strains commonly found in general practice, but whether this is so or not, the results in figure 2 are of little use in the promotion of Augmentin as "the drug of choice".

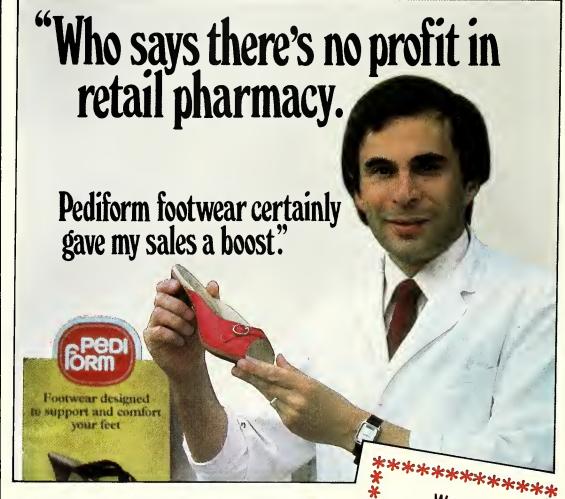
In conclusion, I am in no way criticising the scientific content or accuracy of the data presented, and I do believe that Augmentin will become a genuinely useful oral antibiotic. What I do question is the conglomeration of data to produce a scientific article in a style usually reserved for advertisement features to general practitioners.

This feature clearly demonstrates that clavulanic acid is a useful entity, but I feel that on close inspection it fails to demonstrate that Augmentin is as remarkable as the title suggests.

I. V. Morland London N3

Mr Brian Lynn replies: The article was a brief outline of the development and properties of Augmentin. The space available did not permit any detailed discussion of the illustrative data presented and I am, therefore, pleased to have this opportunity of commenting on

Continued on p878



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#### LETTERS

Continued from p877

the points raised by your correspondent.

1. The results in figures 1 and 2 were taken from different studies, carried out under different experimental conditions. The differing MIC values of amoxycillin against *Staph aureus* 1555, which represent one tube different in two-fold dilution tests, were due to differences in the size of the bacterial inoculum used, the higher value representing the larger inoculum.

2. It is misleading to consider Augmentin from the point of view of a ratio of the two components as, unlike the situation

with other types of antibacterial synergy, there is no single optimum ratio of clavulanate to amoxycillin. The essential requirement is that sufficient clavulanate should be present to inhibit the \(\beta-lactamase produced by the bacteria, together with sufficient amoxycillin to act against the bacteria themselves.

The formulation of Augmentin should thus be seen, not in terms of a particularly ratio of the two agents, but as containing the quantities necessary to provide adequate concentrations at the site of infection. The similarity in pharmacokinetics between amoxycillin and potassium clavulanate ensures that the desired concentrations are achieved at the same time. The results included in figure 1 were intended purely to illustrate the very marked reduction in MICs of amoxycillin against β-lactamase-

producing bacteria in the presence of clavulanic acid, and are typical of the sort of observations made during development of the product.

3 & 4. Surveys of isolates from general practice<sup>1</sup>, as well as from hospitals<sup>2</sup>, have shown that very high proportions of pathogens from various sites of infection are sensitive to Augmentin. Figure 2 was not, however, intended to demonstrate this fact, but simply to show the effect of Augmentin in vitro against a wide range of Gram-negative and Gram-positive bacteria. Thus Escherichia coli, Haemophilus influenzae and Staph aureus are extremely common pathogens, which between them account for a high proportion of infections encountered in general practice, and the protective effect of clavulanate extends the spectrum of amoxycillin to include ß-lactamaseproducing strains of these bacteria. Activity against \( \mathbb{B}\)-lactamase-producing Neisseria gonorrhoeae could also have been demonstrated, had such a strain appeared in the table.

Organisms against which Augmentin is not effective, namely Enterobacter aerogenes, Serratia marcescens and Pseudomonas aeruginosa, were included for interest, though it should be borne in mind that these bacteria are uncommon pathogens. Likewise, the table included non-\(\beta\)-lactamase-producing strains of other bacteria, against which the clavulanate component would not be expected to enhance the activity of amoxycillin, because it is also important to demonstrate that there is no interference.

#### Serum levels

Two further points are worth making. First, it should be remembered that MIC values of Augmentin in figure 2 comprise two-thirds amoxycillin and one-third clavulanate. This is relevant when the values are compared with the serum concentrations resulting from one tablet of Augmentin — as is the fact that two tablets may be taken for infections caused by less-sensitive bacteria. Second, organisms such as E coli and Pr mirabilis are largely of importance as urinary tract pathogens, so that one must in this context consider the extremely high urine levels achieved with Augmentin, which far exceed the MICs for these bacteria.

I am pleased to note that your correspondent regards Augmentin as a major advance in antimicrobial therapy and hope that the above comments will serve to clarify the issues he raises.

References

1. Proceedings of the First Symposium on Augmentin, 1980, pp 173-183 (Editors G. N. Rolinson and A. Watson). Excerpta Medica, Amsterdam, Oxford, Princeton. 2. *Ibid* pp 58-73.



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More Letters on p880



# Halina

#### LETTERS

Continued from p878

#### **RPA** fund closes

The Rural Pharmacists Association has now closed the Tenterden appeal fund, and the final sum, a total of £11,103, has been sent to Mr Dennis Pay of Paydens Ltd, Tenterden.

The cause was a most worthy one, as was the defender of it. The response was magnificent, and I would like to thank all those who donated to the fund most warmly.

The RPA — a youthful organisation at the beginning of the appeal — has matured and developed into an association which has blossomed under the trust placed in it by many hundreds of pharmacists.

The RPA can now, with the trust and support given by so many, set its sights and concentrate its efforts into supporting the rural pharmacist in their fight for survival, and to endeavour to see that the service provided for rural patients is the best that can be provided.

John Davies Secretary, RPA Wiveliscombe.

#### Link PA to NIC

The new payment scheme proposed by PSNC would appear to confirm the conclusion reached in my article in the *C&D* July 25 that the new discount scales had the effect, when combined with the on-cost scales, of giving all contractors approximately the same net on-cost profit regardless of the number of prescriptions dispensed.

I made the observation that instead of having these two complicated and largely unworkable scales it would in fact have been preferable to abolish them. That observation, however, was based on the parameter that the income received by contractors as a result of the present scales is acceptable. Comments in the pharmaceutical Press at the time would appear to have shown that many contractors were not in fact satisfied and held the view that the PSNC should not have accepted an average discount of 5.44 per cent, let alone present the DHSS with the discount scale to be used.

The PSNC have failed to convince the DHSS of my proposal (passed incidentally in a motion at last year's LPC conference) that the on-cost and discount scales should be based on net ingredient cost (NIC) and be cumulative, and therefore this second proposal is the only viable alternative. It must be borne in mind that the figure of £8,000 practice allowance and 42.1p professional fee only gives a

return similar to that earned with a NIC of approximately £2.60 per item. Also, for the proposed scheme to continue to give a return comparable with that obtained via the present scheme there must be an inbuilt and approved formula for increasing the PA in line with the increases of prices in NIC. Failure to do this will result in an inevitable decrease in income.

Alan Spivack London N1

#### Xrayser in a hole?

"Knock, knock." "Who's there?" "Xrayser." Come on Mr Editor, take him away, he's breaking my heart. Keeps on digging holes and stepping backwards into

I refer to his excavation of October 17. The initial spadefalls were of trade war and decimation of hard-grafting chemists by nasty supermarkets and how he liked to put the baby Unichem on its infant head, as it struggled against those powerful grocery forces. About this time he backed (seemingly with hard cash) another fledgling in the flight.

Now ten long years are gone, the world has grown more inhospitable and our two babes are grown and flexing muscles (this is where he steps backwards I suspect). In a fit of terror he calls on the "taste of professional men" to stop exchanges of commercial flak he cannot stomach and so strangle the best chance we have of getting back at those aforesaid nasty grocers.

Finally, don't let him kid me that he never takes a holiday, and if Unichem can sell jewellery in multiples of £500 to its members, it would seem somebody is winning that fight.

**David Sugden** Eccles, Lancs

#### Clinical pharmacy

Table 3 in last week's clinical pharmacy article on the cardiovascular system (p834) should have been printed with arrows next to several of the "aims" and "methods" indicating an increase or a decrease. The correct versions are shown below

#### Method

Cardiac workload | Tissue demand (oxygen demand) (perfusion) ↓ Preload

↓ Afterload

↑ Cardiac efficiency ↑ Contractility

Improve rhythm

↑ Blood oxygenation

#### POSTSCRIPTS

#### 'Herbals'

What came first the chicken or the egg, herbs or galenicals, pharmacognosy or genetic engineering, the apothecary or the chemist and druggist, the pharmacy or the

In her column in Cosmopolitan, Barbara Griggs, author of "A green pharmacy: history of herbal medicine", expresses surprise that pharmacists are interested in either health foods or herbal and homoeopathic medicines. The evidence was the attendance of many retail pharmacists at a health food exhibition following an advertisement in C&D.

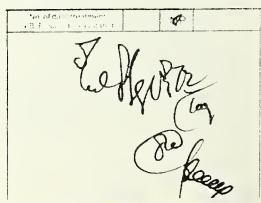
It is suggested that British chemists face a tricky problem in that: "they know only too well that some of the man-made drugs they dispense will not solve the medical problems for which they are prescribed . . . a smaller proportion may actually be harmful."

The public are portrayed as being increasingly dissatisfied with "orthodox" medicine with the pharmacist losing customers to health food shops and sceptical about "natural" remedies.

A speaker at a recent "annual conference of the Pharmaceutical Society" is said to have thrown a somewhat dubious lifeline to the "beleaguered" High Street chemist when he pointed out that herbs "can be dangerous" because of problems connected with their quality and a lack of sufficient data to establish their safety and efficacy — qualified personnel only should be allowed to dispense herbal medicines [we presume he meant pharmacists].

But Cosmopolitan see medical herbalists as the qualified persons -"present day courses in pharmacy hardly produce experts on medicinal herbs." (Come back Trease, all is forgiven!).

Cosmo predicts bitter battles between herbalists and pharmacists over who is going to sell our herbal medicines.



Perhaps entry to the College of Pharmacy Practice should be awarded for deciphering this script (it is actually for phenylbutazone 100mg)



#### **IPMI CONFERENCE**

# Legal and moral duty to supervise all medicines

One reason why the General Sale list is so large is that pharmacists have not yet convinced the legislators and society in general that there is any real difference between buying medicines from pharmacies and buying them elsewhere.

This view was put to the Institute of Pharmacy Management International conference in Aldeburgh last week by Dr Ian Jones, pharmacy practice research unit, University of Bradford. He believed pharmacists had both a legal and a moral duty to be aware of sales of all medicines — not just pharmacy medicines — from their premises.

The moral duty arose because people bought medicines from pharmacies on the understanding that they would receive a higher standard of advice than from a general store. A pharmacist who delegated this specialist advice to someone else was breaching his duty to care and could be verging on negligence.

The legal duty arose under the Medicines Act which required pharmacists to supervise sales of pharmacy medicines and to have personal control of GSL medicines. Dr Jones believed there was "precious little difference, if any" between the words "supervision" and "personal control" — to him, the latter meant far more than "just being around on the premises".

For this level of care, Dr Jones believed there should be two pharmacists per pharmacy. More clinical information should be given in the undergraduate training and continuing education should be mandatory. There was a strong need for patient registration with pharmacies as a basis for adequate remuneration; time spent advising a patient not to buy a medicine might be highly ethical but was not very good for profitability, and there was a case for pharmacists accepting pharmaceutical responsibility for patients in the same way doctors accepted medical responsibility.

#### Positive selling

Speaking on "Selling medicines — a positive approach", Mr G.B. Green, marketing director, Savory and Moore Ltd, agreed that the pharmacist's place should be primarily at the pharmacy counter, engaged in customer contact rather than as a "shadowy, white-coated figure in the background." This contact could only be achieved if all dispensing except the most difficult extemporaneous

activity were carried out by trained technicians. The pharmacist could supervise all the dispensed medicines as they were handed out, and it was his duty to supply full directions with every item even those prescribed "as directed".

To be effective in customer contact, pharmacists — many of whom were introverted by nature — needed to acquire communication skills, and additional training in basic selling techniques would make this role commercially viable.

Mr Green suggested that pharmacists could increase their 50 per cent share of the spending on OTC medicines by seeking to sell to patients many of the items which, because of prescription charges, were no longer included on the prescription. They should also offer linked products with any OTC medical purchase. For example, when a lotion or ointment was prescribed the pharmacist should discuss how the area should be cleaned, thus leading to the sale of cleansing solutions and dressings. Even if the suggestions were not taken up, most patients would consider this extra guidance as helpful and it would enhance both the pharmacist's and the profession's reputation in the eyes of the

The speaker was confident that the professional integrity of most pharmacists would prevent them persuading customers to buy medicines they did not need. "The sensible business approach of attracting regular, satisfied customers will be seen to be far more important than the amount each customer buys on a single visit," he said. The extra time spent in customer contact might also be influential in achieving Basic Practice Allowance payments that took proper account of the pharmacist's role in the primary health care team.

#### Counterprescribing survey

In his Janssen Award lecture, Mr Douglas Bentley, a general practice pharmacist from Berkhamsted, presented the results of a survey he had done on counterprescribing. He asked 140 pharmacists, selected at random, to record their response to patients' requests for advice. A total of 977 requests were recorded on the 44 forms returned; on 510 occasions a medicine was sold from the shop on the pharmacist's recommendation, on 244 a medicine was "made up" in the dispensary, on 139 advice was given but

no medicine supplied, and 84 patients were referred to their doctors.

By far the most counterprescribing was done in country areas (40 per cent) and least in suburban neighbourhoods (17 per cent). City and suburban high street areas were about equal (22 and 21 per cent). There was no significant difference in the amount of counterprescribing done by independent pharmacies and small multiples, but no comparison could be made with large multiples because only one form was returned. Most counterprescribing was done by businesses dispensing over 40,000 prescriptions a year but no firm conclusions could be drawn from this finding. Pharmacists over the age of 55 had done more counterprescribing than the under 35s and had referred more patients to a doctor. There was no significant different in the amount of counterprescribing carried out by male and female pharmacists.

Mr Bentley's survey also revealed that 95 per cent of patients were satisfied with the medical advice they sought from pharmacists (last week, p845).

Among his conclusions were that pharmacists should extend their role as primary care advisors and "sell themselves" more; they should press for a sensible extension of the range of medicines available to counterprescribe, and they should record all counterprescribing in detail to assist in a defence if they were sued for negligence.

#### Consumer views

Mrs D. Harris, a member of the British Standards Institution's consumer standards advisory committee, gave her view of "consumer expectations of pharmacists". Her main criticism was that pharmacists were becoming too inaccessible in modern supermarket-style businesses and she was sorry that the oldfashioned image of the "friendly neighbourhood chemist" appeared to be disappearing. Too often customers were told that the pharmacist was "busy, on the phone, out to lunch", etc. No matter how helpful assistants were, customers had often come to the pharmacy specifically for qualified advice, maybe summoning a great deal of courage beforehand.

While appreciating that pharmacies were having to diversify to make ends meet, Mrs Harris disliked having to plough her way through "tights, toys and piped music" before finding a place to lodge her prescription. Other suggestions—on dispensing—were that pharmacists should always draw attention to possible side effects, should always label medicines

fully with dosage instructions and make sure that patients knew how to open childresistant containers. On the whole, she believed that pharmacists were well respected by the public.

During the discussion, members of the audience seized the opportunity to put right some typical consumer misunderstandings about pharmacy and decided that further meetings with "influential consumers" such as Mrs Harris would be most beneficial for the profession.

#### Profits in the US

Professor Dean Leavitt, school of pharmacy, University of Maryland at Baltimore, gave the Upjohn lecture on "US community practice: profitability and liability". Latest figures available showed that in 1979 the average US independent pharmacy had a sales volume of £210,581 at a gross margin of 34.3 per cent; total expenses were 31.3 per cent, net profit was £6,247 (3 per cent) and the owner manager earned nearly £20,000. The average pharmacy derived about half its volume from prescription sales, filled 27,187 prescriptions and charged an average of £3.86 for a prescription.

The average chain pharmacy had total sales of £863,847, of which only 17.9 per cent was accounted for by prescriptions. The gross margin was lower at 28 per cent, as were total expenses at 23.8 per cent. Net profit was 4.2 per cent. The number of prescriptions filled was 43,877 at an average price of £3.52, over 8 per cent lower than the independents' price. The chain pharmacy opened 84 hours a week, employing pharmacists for 81 of them, while the independent pharmacy was open

Professor Leavitt went on to say that in the US the patient was becoming the head of the health care team. Whereas in the 1950s and 1960s it was considered unethical for pharmacists to discuss the use and side effects of medicines with their patients, the past 10 years or so had seen a complete reversal in the pharmacist's role and his or her liability. It was now the pharmacist's professional duty to help, in every way, the patient's rational use of drugs. As more pharmacists became involved in patient education it would become more difficult to avoid liability if that information was not conveyed to the patient and injury resulted. As yet, no pharmacists had been involved in liability cases through not giving information or giving the wrong information, but the likelihood increased every year, and all pharmacists took out professional liability insurance.

This greater involvement of pharmacists in patient care had been a result of a shortage of doctors and Professor Leavitt was interested to see what would happen when the shortage was remedied in the next 10 years.

Reviewing current developments in product liability in Europe, Mr G.C. Tuck, legal director, Miles Laboratories Ltd, said that strict liability would increase the industry's insurance premiums by anything between 100-500 per cent. Society would become more litigation-minded and the industry would become an obvious target, so that more staff and resources would be channelled into handling real or specious claims. Strict liability would also lead to defensive medicine in which doctors would be unwilling to prescribe new drugs until they had been well tried by others, a further disincentive to innovation.

It has been reported that, within the EEC Council of Ministers' working party, six member states are opposed to a "state of the art" defence; Italy, the Netherlands and the UK are in favour while West Germany is reserving its position. There is also disagreement about whether there

should be an upper limit of liability, currently proposed at 25 million European Units of Account (about £16.75m).

During a session on shoplifting, Baroness Phillips, director, Association for the Prevention of Theft from Shops, described how the Association was encouraging retailers to co-operate with each other by setting up local anti-theft groups. She recommended pharmacists to contact APTS at 303 Grand Buildings, Trafalgar Square, London WC2N 5EP. ☐ Mr Stephen G. Davison, MPS, managing director, F.C. Davison & Son (Chemists) Ltd, Sutton-in-Ashfield, is to be the next chairman of the Institute, from April 1982. Miss Hazel Guest, MPS, a pharmacy manager with Boots, will be vice-chairman.

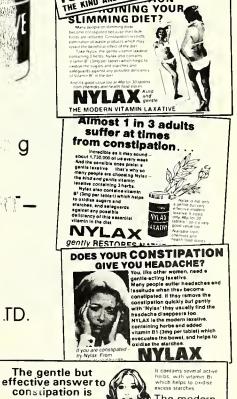
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#### **NEWS EXTRA**

# Plans for next PSNC and LPC elections

Elections will take place early in 1982 for members of Local Pharmaceutical Committees and regional representatives on the Pharmaceutical Services Negotiating Committee.

Nomination papers and voting papers will be sent automatically to every pharmacy contractor who is entitled to a vote for each pharmacy in the Family Practitioner area in which the premises are situated — the new term of office for LPCs is from April 1, 1982 to March 31, 1986 and for the PSNC from May 1, 1982 to April 30, 1986.

Separate elections are being held for employee representatives on LPCs and any employee who is in doubt as to whether his name has been submitted

should forward his name and address (together with the name and address of his employer), to the Secretary, PSNC, 59 Buckingham Street, Aylesbury, Bucks HP20 2PJ, not later than Friday, January 1, 1982.

The timetable for the elections is:

Election notice and nomination forms to be issued not later than January 5, 1982.

□ Nomination papers to be returned by noon on January 22, 1982.

□ Voting papers to be issued not later than February 9, 1982.

□ Voting papers to be returned not later than February 22, 1982.

☐ Results declared on or before March 15, 1982. ■

# Japanese move into instant photos

The long wait for the arrival of the Japanese onto the instant camera market is finally over with the launch of Fuji's "Fotorama" system. For the present, sales will be concentrated on Japan only, but success in the Far East will undoubtedly see expansion into US and European markets.

The system is Fuji's own, but the film has been developed to be compatable with Kodak PR10 and may be used in Kodak cameras. Film development time is put at around 60 seconds and a "memo" column allows data to be recorded on the print. The result, say Fuji, is a new



generation instant picture system that "sets new standards in both picture quality . . . and user convenience".

The initial launch includes a 10 shot film, which retails at just over £5 in Japan, and two camera models. A built-in flash version can now be bought in Tokyo for around £66, and without the flash,

£36. Separate flash guns are approximately £20.

□Problems over patents has probably prevented an earlier move into this field by a Japanese company, but now the country's largest photographic manufacturer has taken the plunge at a time when the makers of the two most popular systems have entered into litigation — Polaroid recently having gone ahead with 10 patent infringement suits against Kodak in the US. ■

#### GP calls for peace

A letter in last week's General Practitioner calls for pharmacists and doctors to "stop this foolish professional jealousy, and concentrate on giving a good service to the patient, in their different ways". Writing on the rural pharmacist issue, the correspondent suggests that over-the-counter diagnosis as proposed by Dr I. Michaels at the British Pharmaceutical conference would be a step into the past.

He says that many rural practices would not survive without the income from the dispensing side of the practice, and queries whether the pharmacist would be prepared to offer the 24 hour service provided by the doctor.

■In the last event of the season for the South London and Surrey Pharmacists Golfing Society, held at the Addington Golf Club (sponsored by Beecham Foods and Vernon Powell Ltd) the first prize and the title of Master Golfer 1981 was won by S.M. Hutchingson (Blackheath). Runner-up was Mr Ted Jolbing (Uxbridge).

## More products fail to gain approval

The proportion of product licence applications which the Committee on Safety of Medicines advises should be granted has dropped for the third year running.

In 1980, out of 167 product licence and licence variation applications determined by the CSM, they advised the Licensing Authority that 63 should be granted and provisionally advised refusal on 101. In 1979 out of 180 applications, the CSM advised that 81 should be granted and 85 provisionally refused. This has not happened with clinical trial certificates where the proportions have remained fairly constant.

In its annual report for 1980 the Committee says the reasons behind this trend are hard to identify but there is every indication that it will continue in 1981. One effect has been that pharmaceutical companies representations against the Committee's provisional advice reached a new "high level" and took up a considerable part of their time. Two additional meetings had to be arranged for the second year in succession.

# Effectiveness of CRCs questioned

The Medicines Commission has given some support to the view that childresistant containers will not prevent poisoning by medicines. In their annual report for 1980 the Commission note that they talked with Dr Goulding, director of the poisons unit, New Cross Hospital and that his comments confirmed the paramount importance of educating adults (particularly grandparents) to keep medicines away from children.

They were impressed by his view that the extent and severity of child poisoning by medicines had been widely overstated in some quarters and that improving packaging would have little effect on the total number of cases since the prime cause was carelessness by adults.

## **Tenterden case on Thames News**

Mr Dennis Pay of Paydens Ltd and Mr Bruce Rhodes, an assistant secretary of the Pharmaceutical Society, were both interviewed on "Thames News" last Friday. Referring to the situation in Tenterden, Mr Rhodes said if this was to carry on throughout the country it would be most unfortunate and an "undignified squabble" would do the public no good.

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#### **BUSINESS NEWS**

# Glaxo claim market leadership in 'ethicals'

Glaxo claim to have captured the leadership of the UK pharmaceutical market with sales of their "ethicals" now exceeding those of any other drug company in terms of both sales value and prescription volume. Excluding Vestric, turnover was up 23.6 per cent to £537 million for the year end June 30 (*C&D*, October 17, p762).

The company is maintaining a £45 million spend on research and development and Sir Austin Bide, chairman, says in the annual report that clinical trials of their new cephalosporin, ceftazidime, are under way in several countries. Plant is currently being installed in their northern factories in the UK for its production. Wider acceptance of ranitidine — which so far has approval in the UK and Italy — is also being sought.

Glaxo say Ventolin is now the most important prescribed "ethical" medicine as measured by the number of prescriptions, and Trandate sales have improved 30 per cent. Zinacef has doubled its volume in the past year, giving Glaxo UK leadership in second generation cephalosporins, while sales of topical steroids has been maintained. A "marked growth" is also recorded in their share of the analgesic market with DF118 products. Several new entities for a variety of clinical indications are also said to be at earlier stages of development.

Production of the loss making streptomycin was stopped during the year and the small factory at Runcorn manufacturing a range of primary products has been closed down as uneconomic.

Falls in both sales and profit at Vestric are related to the "complete reorganisation of its operations," but Sir Austin reports that despite the continuation of difficult trading conditions, "good progress is now being made."

Recession and the strength of sterling in the first half of the year adversely affected sales of consumer products through Farley Health Products, but a better second six months — helped by substantial export orders — has continued the profit growth seen in the past two years.

Sefton Bulk Pharmaceuticals exceeded sales budgets despite the strong pound and customer destocking overseas, and Macfarlane Smith maintained their market share while contributing satisfactory profits.

Overseas, a number of building projects have been given approval or are now under way, including a secondary production pharmaceutical factory in the US. Arrangements have been made to form a group subsidiary in Norway.

Total pre-tax profits rose to £87.33m (£66.1m) on a turnover of £710.5m (£618m). Overseas sales were up £67m to £394m and exports by £44m to £176m. The company contributed £27,000 for political purposes in the UK — £25,000 to the Conservative Central Office and £2,000 to the Centre for Policy Studies. Charitable donations amounted to £76,000. ■

# DITB should stay says NPA director

The National Pharmaceutical Association has made a strong plea for the continuation of the Distributive Industry Training Board in a letter to the new Employment Minister, Norman Tebbit.

Noting the "enormous help and encouragement" DITB has given them in providing training services, Tim Astill, NPA director, says: "Effective training is vital in retail pharmacy, probably more so than in any other sector of the distributive industry. But most of our members have neither the time nor the other resources to provide it adequately. They look to us ... for assistance and we in turn look to t DITB"

Mr Astill also mentions the curre-

programme for training assistants — which is closely linked with local DITB groups — and discussions being held on a new course for dispensary assistants. Asking for assurance that the Board's facilities, "so painstakingly acquired", will not be "uselessly dissipated", he concludes: "No doubt also you will be considering how the Government will continue to provide the support for training schemes such as ours which have been stimulated, if not initiated, by the DITB, and the scale of which has been decided in light of promised DITB finance".

The only hint so far from Mr Tebbit on the fate of training boards is that some will be retained in "key areas", and an announcement is expected in the near future.

# EEC delay ruling on pharmaceutical advertising control

The European Commission is not yet ready to suggest an EEC law on controlling the advertising of pharmaceutical products. It thinks specific action is unnecessary in the present circumstances but does not rule it out in the future. This was stated in the Commission's answer to a question by Michael Welsh, Conservative Member of the European Parliament for Lancashire Central, writes our European consultant, Richard Carswell.

Mr Welsh had pointed out that in the Commission's report accompanying its proposals for the mutual recognition of national drug marketing authorisations, the Commission had said it did not think it advisable to make a specific proposal on the advertising of proprietary medicinal products. But the Second Consumer Action Programme adopted by the EEC last May said the opposite.

According to its reply to Mr Welsh's question the Commission saw no contradiction. The draft general directive on misleading and unfair advertising would apply to pharmaceutical products in the Commission's opinion. Once this directive is adopted and depending on its final shape, the Commission says it will then decide whether or not to make further proposals on pharmaceutical products.

The misleading advertising directive has been held up in the Council of . Ministers for several years now. Member States remain divided over several issues, including the question whether the advertising industry should police itself or be subject to national regulations.

# Upjohn to increase R&D spending

Upjohn are planning to increase their spending on pharmaceutical research and development in order to speed up drug development.

Speaking to a group of health care analysts in the US, Dr Theodore Cooper, executive vice-president, said he thought they could reduce a drug's development period by up to two years. Upjohn will be accelerating their efforts in several areas of research including central nervous system disorders, antidiabetic agents, antibiotics and prostaglandins, he said, and were planning to increase research and development expenditure by about 2 per cent of pharmaceutical sales.

The company expects three new products to be shortly given FDA approval — Xanax (alprazolam, a benzodiazepine), Halcion and Micronase (glibenclamide). ■

#### Pears plan appeal in Astral case

A&F Pears Ltd are to appeal against the decision that they applied a false description under the Trades Description Act by means of the design of the double skinned jars of Astral moisturising cream.

The company has been given four months in which to report progress on their plans to redesign the jars. This follows a guilty verdict brought by a jury at Croydon Crown Court on October 26, when the company, who sell between 21/2-3 million jars of cream a year, had denied an offence under the Act.

At the court on October 30, Judge David Thomas deferred sentence for four months after being told by Mr John Marriage, QC for the company, that a jar with an entirely new design was being prepared. The judge said that other manufacturers would also have to make changes to comply with the law. Although appealing against the conviction the company would go ahead with their plans for alterations in any case.

#### No stock withdrawal

Mr Marriage said the main task for the company was to provide a new pot which will not in any way offend the Act. It was estimated that the last of the old pots would have been sold by the Spring of 1983. "If the Court were to think that we should withdraw all the stock, there would be enormous expense involved". The judge said he would not dream of suggesting that that should be done. "It would be a terrible waste," he declared. "We must bear in mind that the case has been given a fair amount of publicity and the public, by reason of that publicity, is less likely to be misled."

Mr Marriage spoke of the company's short-term plan, which was to have overprinted on the jars the words: "Double shell construction". The company had already begun printing both the weight and volume on their jars. These extra words would appear on the jars from about January, 1982. The overprinted jars would be on sale alongside the old ones and this may cause some confusion. By Christmas 1982 the customer would find three different jars on the shelves — the original one, the overprinted one and an entirely new one.

The judge said: "Others involved in the design of packaging had better look to their laurels". He commended Pears for their responsible attitude to the prosecution.

The case had been brought by Lambeth Council, after their weights and measures office bought a 54g jar of the cream from A.L. Steed's chemist shop in Clapham High Street.

#### **MARKET NEWS**

#### Dearer glycerin

London, November 3: The price of glycerin advanced recently by £50 metric ton; the rise follows a similar-sized uplift only three months previously.

Among essential oils, the price of Chinese anise slipped back by about £1 kg. Dearer were cananga, cedarwood and patchouli. On the spot citronella and eucalyptus were easier.

Synthetic camphor continued its firmer tone reflecting the tight supply position of the natural powder. Brazilian menthol moved up but Chinese material was unaltered on the week.

Among botanicals the price of Canada balsam jumped dramatically at origin and spot holders withdrew their offers. Dandelion was on offer for shipment after a long absence. Liquorice root was again easier but shortage of block juice from China persists.

#### Pharmaceutical chemicals

Acetone: £374 metric ton for 30-drum lots.
Acetic acid: 4-ton lots, per metric ton delivered — glacial BPC £376, 99.5 per cent £359, 80 per cent grade pure £327; technical £306.

Accetarsol: £21.16 kg in 50-kg lots. Ammonium acetate: BPC 1949 crystals £0.8635 kg in 50-kg lots; strong solution BPC 1953 £0.243 kg in 250-kg lots ex

Ammonium bicarbonate: BPC £234.77 metric ton, ex-works, in 50-kg bags.

Ammonium tartrate: Commercial £3.29 kg in 50-kg lots.

Bismuth salts: £ per kg.

salicylate	50-kg 10.92	250-kg
subcarbonate	8.10	7.96
subnitrate	6.15	6.04

Borax: EP grade, 2-5 ton lots per metric ton in paper bags, delivered — granular £321, powder £349, extra fine powder £365.

£365.

Boric acid: EP grade per metric ton in 2-5 ton lots — granular £482; powder £513.

Ether; BP anaesthetic 2-litre bottle £4.20 each for 175 bottles; in 180-litre drum £1,338.75 per 1,000 litres for 8 drums. BP solvent in 180-litre drum from £1,237.50 to £1,142 per 1,000 Glycerin: In 250-kg returnable drums £860 metric ton in 5-ton lots; £885 in 3-ton lots.

Kaolin: BP natural £181.25 per 1,000 kg; light £189.10 ex-

Kaolin: BP natural £181.25 per 1,000 kg; light £189.10 exworks in minimum 10-ton lots.

Lactic acid: BP 88/90% £1.80 kg in 70-kg drum.

Lignocaine: (50-kg) base £11.28 kg; hydrochloride £11.36.

Lobeline: Hydrochloride BPC and sulphate £1.49.

Magnesium carbonate: BP per metric ton — heavy £820; light £570-£640 as to maker.

Magnesium chloride: BP crystals £1.10 kg for 50-kg lots.

Magnesium dihydrogen phosphate: Pure £2.45 kg in 50-kg lots.

Magnesium hydroxide: (metric ton) BPC light £1,800; 28 per cent paste £550.

Magnesium oxide: BP per metric ton, heavy £1,700; light

Magnesium oxide: BP per metric ton, heavy £1,700; light £1,800.

Magnesium sulphate: BP £147.10-£150 metric ton; commercial from £132.60; exsiccated £310.60.

Magnesium trisilicate: Light £0.74 kg; heavy £0.72 kg in minimum 900-kg and 1,200-kg lots respectively.

Mercurials: Per kg in 50-kg lots; ammoniated £15.20; oxide — red £16.30; and yellow £16.05; perchloride £8.85; subchloride £12.10; iodide £15.

Mersalyl: Acid £66.75 kg in 24-kg lots.

Petroleum jelly: BP soft white grade 54 £526 metric ton delivered UK in 170-kg drums; yellow BP in grade 60 £526 in 174 kg drums.

Reserpine: 100 gram lots £0.22g.

Riboflavine: (Per kg) £24.62 in 10-kg packs, diphosphate sodium £80.30 in 5-kg.

Saccharin: BP sodium, powder £3.80 kg; crystals £3.40, both for 250-kg lots.

Tartaric acid: £1,795 per metric ton.

Vitamin D2: Type 850 £49.50; type 80 £5.61 kg (25-kg lots).

Vitamin K: £1.16 kg.

Zinc carbonate: Pure £1.43 kg in 50-kg lots.

Zinc chloride: Anhydrous powder £450 metric ton, delivered U.K.

#### Crude drugs

Balsams: (kg) Canada: Short on spot, no quote; shipment £16.10 cif. Copaiba: £5.45 spot; £5.40, cif. Peru: £10.80 spot; £10.85 cif. Tolu: Spot £5.30.

Belladonna: herb £1.10 kg spot; £1.14, cif; leaves £1.14 kg; £1.80, cif; root no spot; £2.34 kg cif.

Benzoin: £214 cwt, cif.

Camphor: Natural powder £10.25 kg spot; £9.25, cif. Synthetic 96% £1.40 spot; £1.25, cif.

Cardamoms: AGN £5.50 kg, cif.

Cochineal: (kg) Tenerife black brilliant no spot; £26 cif; Peru

Cochineal: (kg) Tenerife black brilliant no spot; £26 cif; Peru silver £19.60; grey spot £19.40, cif.
Dandelion: No spot; £2,400 metric ton, cif.
Gentian roots: No spot; £2,820 metric ton, cif.
Kola nuts: £400 metric ton spot; £230, cif.
Lanolin: BP grade £1.05 kg in 1 metric ton lots.
Lemon peel: Spot no offers; Shipment £2,005.
Liquorice: Root, £555 metric ton spot; £570 metric ton, cif.
Block juice £1,400 metric ton spot.
Lobelia: European, no spot, £1.49 kg, cif.
Mace: Grenada unsorted \$2,850 metric ton, fob.
Menthol: (kg) Brazilian £6.25 spot, £6.65, cif. Chinese £6 spot; £5.90, cif.

Sarsaparilla: Jamaican no spot; £3,115 metric ton, cif.
Seeds: (metric ton, cif). Anise: China star £1,700. Celery:
Indian £500. Corlander: Moroccan £350. Cumin: Indian £685.

Fennel: Chinese £475. Fenugreek: Moroccan unavailable;

Indian £350.

Senega: Canadian no spot; £7.65, cif.

Senna: (kg) spot Alexandria pods hand-picked from £1.80 upwards; manufacturing £0.50 Tinnevelly faq leaves £0.42; pods, faq £0.42; hand-picked £0.50.

Valerian: Dutch No offers spot; £1,500 metric ton, cif. Indian £1,380 spot; £1,443, cif.

#### Essential and expressed oils

Almond: Sweet in 4-ton lots £1.60-£1.70 kg duty paid.

Anise: (kg) Spot £14; £13.25, cif.

Bay: West Indian £10 kg spot; £9.90, cif.

Bergamot: £28 kg spot (new crop).

Bois de rose: £8.60 kg spot; £8.10, cif.

Cananga: Indonesia £19 kg spot; £18.50, cif.

Cardamom: English-distilled £155 kg; Indian £110.

Cassia: Chinese £53.50 kg spot; £52.50, cif.

Cedarwood: Chinese £2 kg; £1.90, cif.

Cinnamon: Ceylon leaf £3.05 kg spot; £2.75 cif; bark; English-distilled, £150.

Citronella: Ceylon £2.75 kg spot; £2.25, cil. Chinese £3.70

distilled, £150.

Citronella: Ceylon £2.75 kg spot; £2.25, cil. Chinese £3.70 spot; £3.70, cif.

Clove: Indonesian leaf £1.95 kg spot; £2 cif. English distilled bud £50 spot.

Eucalyptus: Chinese £2.55kg spot and cif.

Ginger: Chinese £22.50 kg spot and cif, English-distilled (ex W. African root) £70; ex Indian £43.

Patchouli: Indonesia £17.75, kg spot; £17.50, cif.

Pennyroyal: From £7.85 per kg spot.

Pepper: English-distilled ex black £125 kg.

Peppermint: (kg) Arvensis — Brazilian £6.30 spot; £6.40, cif.

Peppermint: (kg) Arvensis — Brazilian £6.30 spot; £6.40, cif. Chinese £3.50 spot; £3.80, cif. American piperata £13.50. Thyme: Red 45-50% £15 kg spot. 50-55% £17. Vetivert: Java £16.75 spot; £16.40, cif.

The prices given are those obtained by importers or manufacturers for bulk quantities and do not include value added tax. They represent the last quoted or accepted prices as

#### **COMING EVENTS**

#### Monday, November 9

Swindon Banch, Pharmaceutical Society, King's Arms Hotel, Wood Street, Swindon, at 8pm. Speaker Dr G. Booth, Bradford University.

#### Tuesday, November 10

Hereford Branch, National Pharmaceutical Association, Green Dragon Hotel, Broad Street, Hereford, at 8 pm. Mr B. Spencer on "Making animals your customers".

Lanarkshire Branch, Pharmaceutical Society, Ravenscraig suite, Garrion Hotel, Motherwell, at 8 pm. Dr Chappell, Glasgow Homoeopathic Hospital, on "The various sources and methods of preparation of homoeopathic remedies".

Leicestershire Branch, Pharmaceutical Society, Postgraduate medical centre, Royal Infirmary, Leicester, at 8 pm. Dr T. Jones on "The College of Pharmacy Practice".

South West Metropolitan Branch, Pharmaceutical Society, St Georges Hospital, London SW17, at 8 pm. Mr D. Taylor on "Problems of the disabled".

#### Wednesday, November 11

Epsom Branch, Pharmaceutical Society, Bradbury Centre,

Epsom District Hospital, at 7.45pm.

Hull Pharmacists' Association, Bali Ha'i, George Street, Hull, at 9pm. HPA annual discotheque.

Leeds Branch, Pharmaceutical Society, St James's University

Hospital, Leeds, at 8pm. Joint meeting with Guild of Hospital Pharmacists, Dr Cunliffe on "Acne".

Plymouth Branch, Pharmaceutical Society, Dingles' restaurant. Annual dinner and dance.

South East Metropolitan Branch, Pharmaceutical Society,

Trafalgar Tavern, Park Row, Greenwich, London SE10, at 8pm. Mr J. Iles on "To promote the interests of the

West Metropolitan Branch, Pharmaceutical Society, Great Western Hotel, Praed Street, London W2, at 6.45pm. Talk by a representative from the Parkinson's Disease Society. Wirral Branch Pharmaceutical Society, Kings Gap Court Hotel, Hoylake, at 7.30pm. Autumn dance and buffet.

#### Thursday, November 12

Bristol Branch, Pharmaceutical Society, Postgraduate Medical Centre, Frenchay Hospital, Bristol, at 8pm. Motions for branch representatives meeting.

Glasgow and West Scotland Branch, Pharmaceutical Society, McCane Building, University of Strathclyde, at 7.30pm. Joint meeting with Guild of Hospital Pharmacists. Speakers on "Current aspects of vitamin C".

Thames Valley Pharmacists' Association, Sterling-Winthrop House, Winthrop Laboratories, Surbiton, at 8pm. Illustrated talk by Mr C. Stanley on "An aerial view along the Thames".

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#### **Announcements**

#### SHOPKIT

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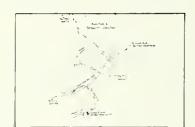
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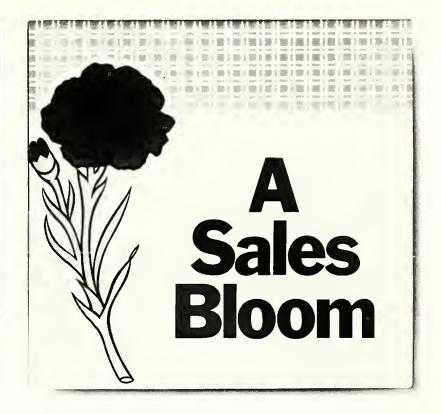


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